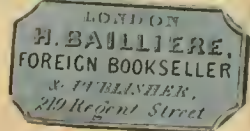


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HOMŒOPATHY;

ITS PRINCIPLE, THEORY, AND PRACTICE.

By M. B. SAMPSON.



PUBLISHED UNDER THE SUPERINTENDENCE OF THE ENGLISH
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P R E F A C E.

THE origin of the present Work will be explained by the following extract, viz.

EXTRACT FROM THE MINUTES OF THE COMMITTEE OF THE ENGLISH
HOMŒOPATHIC ASSOCIATION.

“Committee of the English Homœopathic Association,
London, 21st May, 1845.

“The subject of the first work to be published by the Association having been brought before the Committee, it was unanimously

“Resolved,

“That M. B. Sampson, Esq., be requested to write a Treatise on Homœopathy, and that the same be published by the Association.”

In fulfilling the duty thus indicated, the Author has deemed it desirable to select his illustrations almost entirely from original sources, in order to avoid any appropriation of the labours of other writers upon the subject. Some views, also, will be found (especially in the chapters on the Homœopathic Theory, and the Practice of Homœopathy,) different from those hitherto put forth and ordi-

narily entertained; and it is therefore proper to mention that, for these statements and opinions, the Members of the Committee are neither individually or collectively responsible. They are only responsible for having permitted their confidence in the Author to lead them to select him as one to whom, without reserve of any kind, the execution of a work on Homœopathy might safely be intrusted.

Clapham New Park, Surrey,
1st December, 1845.

INTRODUCTION.

SAMUEL HAHNEMANN, the founder of the medical doctrine called Homœopathy, was born at Meissen, in Upper Saxony, on the 10th of April, 1755. In his earliest youth he was noticed for his grave, studious, and benevolent disposition; but his parents not having the means of obtaining for him a professional education, (his father being a painter on porcelain,) he was destined, at the usual period, to be apprenticed to a trade. Happily, however, at twelve years of age, he attracted the attention of Dr. Muller, the Director of the Provincial School, by whom a free admission was procured for him to all the advantages of that establishment. His progress was rapid, and in a short time he became one of the assistant teachers.

On the completion of his studies at this school, Hahnemann resolved to devote himself to the medical profession. His kind master and friend approved his choice, and arrangements were accordingly made for his admission into the University of Leipsic. With but twenty ducats in his pocket—the only fortune his father could give him—he left his home in the full reliance that, by constant intellectual labour, he would be able to overcome the difficulties of his position. He accordingly added to his means during the course of his medical studies, by translating French and English works into German; and although the toil thus undertaken was so great as to require him to forego rest during each alternate night, he found himself able to sustain it; and at

the end of two years he proceeded to Vienna, to gain in the hospitals of that city the advantages of extensive practical observation.

At Vienna, by his assiduity and talents, he succeeded in gaining the favourable opinion of Dr. Quarin, physician to the Emperor of Austria. The Governor of Hermanstadt having afterwards offered him the situation of medical attendant to his household, he was in that post able to economise a sufficient sum to return to Germany; and at the University of Erlangen, on the 10th of August, 1779, he took his degree of M.D.

After this he settled at Dresden, and in 1785 he married Henriette Kuchler, the daughter of a chemist. At Dresden he acquired many friends, and during the illness of one of them, Dr. Wagner, he officiated in his behalf, as chief physician of the hospitals.

At this time Hahnemann had already published some remarkable works, and among them his well-known Treatise on Poisoning by Arsenic. He had also contributed largely to the medical periodicals, and had thus attained a position of considerable eminence.

But, notwithstanding the prospects that awaited him, he now resolved to abandon the medical profession. In the treatment of disease he found uncertainty everywhere prevailing; and the doubts of the efficacy of medicine, which have often pressed upon the minds of other conscientious physicians so as to induce them to forego practice, rendered him also unwilling to continue it. From this time he occupied himself in chemical studies, coupled with the labour of translating foreign works.

His attention, however, was recalled to medicine by the circumstance of his children being attacked by dangerous illness, and he again earnestly sought for some clue by which certainty might be gained. At length, in the year 1790, whilst translating the *Materia Medica* of Cullen, being struck with the contradictory statements which it contained regarding the action of Peruvian bark upon the human system, it occurred to him to test the

action of this medicine upon himself. The first dose produced symptoms similar to those of the peculiar kind of intermittent fever which the same medicine is known to cure ; and his attention having been strongly arrested by this fact, he repeated the experiment, and also induced some friends to resort to a similar trial, in order to ascertain that it was not accidental. The results in each case were confirmatory of the first, and the question seems to have been irresistibly forced upon him,—“ Can it be possible that this property which I now observe in Peruvian bark of producing symptoms analogous to those of the disease for which it is a remedy, is a property peculiar to medicines of all kinds ?” From that moment he commenced a series of experiments on other substances—mercury, belladonna, digitalis, coculus, &c.,—which, in proportion as he extended them, led him to the conviction that his supposition had really embraced a universal therapeutic law.

Startling and brilliant as this discovery must have appeared to him, Hahnemann was too deeply imbued with the cautious spirit of philosophy to promulgate it to the world, while it yet rested upon narrow evidence. It was not until 1796, six years after the Homœopathic law had occurred to him, that he considered his experiments sufficiently matured to be submitted to the public ; and even then, a small part only of his system was explained in one of the medical periodicals of the day. In 1805, his first work was published in two volumes, entitled, “ *Fragmenta de Viribus Medicamentorum Positivis sive obviis in corpore sano,*” containing the result of experiments made upon himself, his family, and some of his friends, with twenty-seven different medicines. The following year, he published his treatise, “ *Medicine founded on Experience,*” forming the basis of his “ *Organon of the Healing Art,*” which appeared in 1810, and which has already passed through five editions in German, and been translated into several other languages. In 1811, the first edition of a part of the “ *Materia Medica Pura*” issued from the press—a most elaborate and important work, which was completed in 1821.

Having established himself in Leipsie, he delivered, in 1812, a course of lectures on his system, and succeeded in awakening a degree of zeal in the minds of several of his pupils, sufficient to induce them to follow up his discovery. From the results of experiments to which they devoted themselves, much of the information which fills the pages of the *Materia Medica* was obtained.

Hahnemann, however, had not been long resident in Leipsie, before his doctrines and practice excited the active hostility of the physicians and apothecaries of that town, who forthwith united with those of Dresden to prevent him from practising in their neighbourhood. After many efforts, they at length, in 1820, succeeded in obtaining an order from the Saxon Government for the enforcement of an obsolete or dormant law, which prohibits a physician from preparing or dispensing medicines himself; and as it was upon the purity of his medicines and the care with which they were prepared, that the successful application of his discovery in great measure depended, Hahnemann thus saw himself compelled to relinquish practice, or to endanger the real progress of his system by entering into a compromise with his opponents.

Under these circumstances, he did not hesitate publicly to announce his intention to relinquish practice; but the attempt to stifle his doctrines tended rapidly to their diffusion. The disinterestedness of his conduct procured for him from the Duke of Anhalt Cöthen the offer of an asylum, of which he availed himself, and in 1821 he was appointed one of the Duke's Councillors. In 1828, whilst in Anhalt Cöthen, he published, in four volumes, a work on Chronic Diseases, which has obtained a wide celebrity.

In 1827 his first wife died. On the 18th of January, 1835, in his seventy-ninth year, he married Mademoiselle Melanie d'Hervilly, a French lady who had visited Cöthen in order to consult him. On this occasion he determined to settle in Paris, where his medical doctrines had long attracted advocacy and discussion.

In Paris he continued to practice Homœopathy until his death, which took place on the 2nd of July, 1843, in the eighty-ninth year of his age. To the last moment he preserved his moral energy and activity, and he had the satisfaction, many years before the close of his labours, to receive evidence of their results from almost all quarters of the world. It is to an examination of the doctrines thus promulgated that the following pages are devoted.

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H O M Œ O P A T H Y.

CHAPTER I.

ON THE CLAIMS OF HOMŒOPATHY TO INVESTIGATION.—PRESENT
STATE OF MEDICAL SCIENCE.

PRIOR to an investigation of the evidence brought forward in proof of the discovery of an universal law in medicine or in any other branch of natural philosophy, it is in all cases desirable that we should inquire if there be anything in previous experience to render it certain that no such law as the one alleged can by possibility have an existence. This course often saves all further trouble, and in fact furnishes the only ground upon which we can refuse to entertain any proposition, however startling, that may be presented to us. If, for instance, a man of ordinary make were to state that he could jump off Dover cliff, and without the aid of any mechanical contrivances remain during pleasure suspended in the air, we should at once refuse to credit his story, because it would be inconsistent with two facts already recognized, namely, that all bodies in pro-

portion to their density gravitate towards a common centre, and that there is nothing in the composition of Dover cliff by which this property of bodies is modified so as to admit of the experiment successfully taking place. By simply referring, therefore, to these two facts we might pronounce the man to be an impostor; while without this appeal to experience we should be compelled before we could justly use that term, to take the trouble of going to Dover to judge with our own eyes the truth or falsehood of his statement.

Before troubling ourselves therefore to examine the evidence in favour of Homœopathy it will be proper to ascertain if the law upon which that system of medicine professes to be founded can be shown to be at variance with any truth already demonstrated by medical philosophers. The homœopathic law is expressed in the phrase *SIMILIA SIMILIBUS CURANTUR*, or ‘Like cures like,’ that is to say, cure is to be effected by medicines capable of exciting symptoms resembling the symptoms which characterise the disease.

Now, when a physician is summoned to the bedside of a patient there are two sets of phenomena upon which he is called to exercise his judgment, and from which he must (unless he prefer to act at random) decide upon a course of action. The first of these is the symptoms of the patient which he then observes for the first time; the second is the action of medicines on the human frame, with which

he is supposed already to have an acquaintance, and if he be aware of any general law having a mutual relation to both these sets of phenomena, and necessary to be observed in the cure of disease, he will be entitled to test by its harmony or want of harmony with such law any new proposition that may be put forward in connexion with them.

A moderate acquaintance with the present practice of medicine, will serve to show that homœopathy has nothing to fear from any test of this kind. It is evident that in the administration of remedies to the sick one of three circumstances must prevail, namely, that the medicine shall operate in harmony with the symptoms manifested by the patient, that it shall operate in opposition to those symptoms, or that it shall operate without any apparent relation to them; and, upon consideration, it will seem probable that from one of these three circumstances may be derived the knowledge of a general law. If, for instance, it appear in any case that a cure has been completely effected by a medicine known to have the power of producing symptoms of an opposite kind to those of the disease for which it has been administered, we are then, from our previous knowledge of the harmony of the operations by which the physical world is governed, led to consider it probable that in relation to remedies and disease, this condition will invariably be found to prevail. And so in either of the other cases, because it would be inconsistent with much of what

we already know of the material universe to find when two distinct classes of phenomena are related to each other, such relation to be of a shifting and contradictory kind—that in one case the relation between disease and the remedy is marked by the remedy being antagonistic to the symptoms, that in another case harmony exists, and in a third neutrality.

But however probable it may seem that an uniform law may be found to prevail in one of these three directions, no light is thrown upon the subject by the ordinary medical doctrines of the present day. In these doctrines neither Antipathy, Homœopathy, or Allopathy are distinctly recognized,* and it will accordingly be seen that, in practice, medicines are at present promiscuously administered, the mode of whose operation in relation to the diseases for which they are used are of a directly conflicting kind. Under these circumstances, therefore, it cannot be asserted that Homœopathy is open to rejection on account of its being

* The *antipathic* or palliative method of employing medicines (so called from *ἀντι*, *opposite*, and *πάθος*, a disease) consists in producing effects of an opposite nature to the symptoms of the disease, and the axiom adopted is '*contraria contrariis opponenda* : '—the *homœopathic* method (so called from *ὁμοίος*, *like*, and *πάθος*, a disease) consists in administering a medicine capable of producing symptoms analogous to those manifested by the patient, and the axiom is '*similia similibus curantur* : '—and the *allopathic* method (so called from *ἄλλος*, *another*, and *πάθος*, a disease) consists in the administration of medicines which give rise to symptoms altogether different (neither analogous or directly opposite) to those which nature has set up.

in opposition to any principle already established. It is true that if it could be shown that cures are alike performed under the indiscriminate employment of the three different modes, that some diseases should be treated by Allopathic, others by Antipathic, and others again by Homœopathic means, it would tend to prove, that although Homœopathy is not to be rejected on account of its being inconsistent with any principle already recognized, it is to be rejected, because there is no general principle of any kind in operation. But this would be, at once, against all the analogies of nature; and it is besides easy to show that the results of the ordinary medical practice do not justify the conclusion.

That the idea of the non-existence of a general principle in mutual relation to remedies and diseases finds no countenance from experience of the effects of the present indiscriminate mode of practice may be distinctly proved. As medical men profess themselves for the most part to be unacquainted with the specific action of each medicinal agent on the human frame, it is not in their power, except in a very few cases, to state when a cure has been effected, whether the medicine administered was Homœopathic, Antipathic, or Allopathic to the disease; and even if this difficulty were removed by their ascertaining the specific action of each medicine by testing it on persons in a state of health, (which must be the only true method, since when

a medicine is administered to a person in a state of disease we cannot tell whether the alteration which follows is an effect of the medicine or of the disease) they would still be unable to arrive at the desired conclusion, because it is the practice in a majority of cases to administer several medicines at the same time, and it is consequently impossible to tell how much of the cure is to be attributed to one agent and how much to another. The fact that a certain number of cures take place under the present practice would therefore give no evidence that Homœopathy, Allopathy, and Antipathy are all good in their way; and that neither is to be adopted as a general rule, because every real cure that occurs may, for any evidence we possess to the contrary, have taken place under the Homœopathic law. It is only in case the present mixed mode of practice can be shown to be *generally* certain, safe, and efficacious, that we shall be entitled to surmise the absence of any definite principle, and the consequent probability that in different cases it is necessary that the three different modes should respectively be pursued.

Now it will not be difficult to show that the ordinary medical practice is unattended by anything like general success; and there will remain therefore no reason, on the ground of its being inconsistent with that mode of practice, to reject the supposition of the existence of the general law for which the Homœopathists contend. This position attained, we must then accord to the evidence brought forward

by the advocates of the system the patient investigation they demand.

To establish the assertion that the present practice of the healing art is generally unsuccessful, some considerable space must be devoted; first, because it is not a charge that should be lightly made; and next, because if it be correctly founded, it is important that a thorough conviction of its truth should be forced upon the public; since by this means they may be awakened to the expediency of promoting, on all occasions, a candid investigation of any new doctrine, temperately and fairly stated, which may profess to lead to more satisfactory results.

Confessions, even from the most reputed practitioners, of the deplorable uncertainty of the medical art are everywhere to be found; but, strong as this testimony is, it will probably be met on the part of those who feel themselves bound to assert to the public the efficacy of their mode of treatment, by the supposition that, in several cases, such confessions may have arisen from some unknown disappointment; that in others, they may have been caused by wilful adherence to peculiar views, and a consequent dissatisfaction with the rest of the profession; and finally, that they are not unfrequently to be regarded merely as the natural expressions common to men eager in the pursuit of knowledge, who, however much they may have learned, are always dissatisfied that they have not learned more.

Under any circumstances, it will be pleaded that the opinion of ten or twenty, or an hundred, even of the most eminent practitioners, is not to be taken as conclusive evidence against the recognized practice so long as the great body of medical men refuse to admit its correctness.

Thus, whatever weight may be attached by the public to the opinions of such writers as Dr. Abercrombie, who doubts “ whether in medicine we can properly be said to act upon experience, as we do in other branches of science ;” and asserts that “ those who have the most extensive opportunities of observation will be the first to acknowledge that the pretended experience of medical practitioners must in general sink into analogy, and even mere analogy, too often into conjecture ;” it is to be admitted that such opinions, put forward only *as* opinions, however high the position of the writer, cannot be regarded as conclusive. So long as the majority of practitioners maintain that medical science is in a satisfactory state, they will, of course, protest against being condemned merely on the confessions of the minority.

But it is not difficult to furnish presumptive evidence that the majority of practitioners have themselves no confidence in their art. One proof of this is to be found in the well-known fact that, when attacked by illness, the despondency of medical men is always greater than that of other patients; a circumstance for which no more probable reason than

a want of confidence can be assigned, since, although they have a clearer knowledge than ordinary patients of the extent of the evil, they have also a clearer knowledge of the extent of the resources by which that evil may be met. A second proof, and one of a stronger kind, is to be found in the general alarm manifested by the profession during the recent discussions on Sir James Graham's Medical Reform Bill, lest *protection* should not be afforded to them by some stringent law to prevent unqualified persons from practising. Whether such a law was necessary for the protection of the public was not the question; for few seemed to apprehend but that the public might be safely left to discriminate between those who cure their patients and those who make them worse. It was the profession who felt that they could not maintain themselves in competition with the quack; and the *Times*, arguing on their behalf, asserted that, unless protection should be granted, they would inevitably be driven out of the field. Looking at the fact that the qualified practitioner takes the quack at a disadvantage, from the circumstance of the latter not being able to recover fees, and from the peril to which he is exposed from verdicts of manslaughter; considering also, that the qualified party, notwithstanding the expense of his medical education, can always prescribe as cheaply as his opponent, since the one is actuated by sordid motives alone, and usually has to provide for the expenses of dissipation, while the other seeks

only to pursue a path of quiet respectability; and likewise that, however frequently the quack may be resorted to, the result of his nostrums can only be to increase disease, and to make more work for those who can *cure* disease, it does seem utterly inconsistent with a lively faith in the power of working cures that this alarm should have existed. It will therefore fairly be inferred by most persons, even from this circumstance, that the majority of the profession view the present resources of their art with the strongest feeling of distrust.

But by some minds even this inference, obvious as it seems, may be resisted. It may be urged that when their means of living are perilled, although but for a moment, men are apt to be carried away by needless alarm; and that if the question were now seriously put to the profession they would laugh at their recent fears, and express a belief that so far from being driven out of the field by the quack, they would rapidly find themselves in pocket from his attempts, since the precision of the true practice would only be made more strikingly manifest by a contrast with the consequences of the false. In order, therefore, to leave no one unconvinced, it will be necessary to attempt to give some view, not of what the present practice is thought to be, or inferred to be, but of what it really *is*.

This must be accomplished by a reference to the recognized modern authorities. But as each writer on the practice of medicine is accustomed, for the

most part, to state dogmatically the treatment to be pursued in any given case, and to leave it to be inferred that such is the only rational treatment, and that it will commonly be found successful, the numerous contradictions that prevail can only be brought out to their full extent by comparing one writer with another. The works on the practice of medicine being many and voluminous, this would be a serious task—but, fortunately, in the work of Dr. Craigie, on the *Elements of the Practice of Physic*, published so recently as 1840, the usual plan of such publications is departed from; and in addition to the Author's view of the proper treatment of the various diseases, we are furnished, in many instances, with a statement of the views of others. Dr. Craigie himself calls attention to this departure from the ordinary plan, by mentioning as “a melancholy proof of the want of true philosophical principles in our systems of medical education, the existence of an opinion that a work on the practice of physic ought to be the result of the individual experience of the author alone; that all previous and much contemporaneous evidence ought to be rejected; and that he impairs the authority of his work, by admitting the results of the labours of his predecessors and sometimes of his contemporaries.” An opinion which he notices as exclusively confined to medicine;—“a science which abounds in contradictory facts and loose speculations.”

In this work, then, we shall find abundant mate-

rials from which to form our judgment ; and it may be quoted the more readily, because it has received the approval of the profession. Even the *Lancet*, notwithstanding its complaint that “in the literature of medicine in England, marks of degeneration are truly evident and deplorable,” having affirmed that it displays much sound erudition, judgment, and practical knowledge ; that it is written throughout in a scientific spirit ; and that it may be recommended as a safe guide for students, its author being “one of the first pathologists of the day.”

From this book, the following are selections—and first, with regard to the treatment of

AGUE.

Blood-letting, in this disease, though disapproved of as injurious, more or less decidedly, by Morton, Senac, Coliny, and Pringle, has nevertheless been practised or recommended as occasionally useful by various physicians. Notwithstanding the variable results obtained, blood-letting, at the approach of the paroxysm, was tried by Jackson and others of the army physicians, sometimes with apparent benefit, often without any. Still more recently, it has been recommended and practised by Dr. Mackintosh of Edinburgh. It has also been tried by Drs. Stokes, Townsend, and Law, of Dublin, and others ; and also in the East Indies, and with *very opposite results*. THESE RESULTS ARE, IN GENERAL, STILL INCAPABLE OF BEING RECONCILED.

FEVER.

On few subjects have the opinions of physicians been more opposite and variable than on that of the treatment of fever. Methods believed to have the most opposite effects have been confidently proposed and strongly recommended at different periods ; practitioners who have adopted these opposite methods, have each reported their own success to be greatest and most uniform ; and, in short, the treatment of the disease has fluctuated incessantly, according to the fluctuations of medical theory, and the fashionable doctrines of the day. Sydenham pursued a bold and empirical method, and by copious blood-letting attempted to shorten the disease, or mitigate its symptoms. Huxham opposed this plan, and considered evacuations of every kind as injurious.

YELLOW FEVER.

Towne, who regarded this disease as ardent bilious fever, used emetics and blisters to a great extent. Cheney and Hume ascertained that *emetics were always injurious*. Blood-letting is one of the therapeutic agents which has been most frequently employed in the treatment of yellow fever, *and yet has been the subject of the most opposite opinions*. In the congestive form of the disease the remedy most generally indicated is mercury. Some practitioners, however, and among others, M. Dalmas and Dr.

Stevens, *censure more or less strongly the practice of giving any mercurial preparation, and represent it to be either unavailing or directly injurious.*

GASTRIC FEVER.

Calomel is recommended in the treatment of Gastric fever by Hildenbrand. Frank condemns mercury in every shape.

SCARLET FEVER.

Physicians are *not unanimous* in recommending blood-letting in scarlet fever. Antimonial and saline diaphoretic medicines are utterly useless, and in general injurious, and *ought* therefore to be entirely abandoned.

In the malignant form of the disease experience has shown that medicine has little influence.

ERYSIPELAS.

Rose or St. Anthony's fire. [An erysipelatous affection, 'at once very common and very well marked.'] Though *many* have disapproved of blood-letting in the treatment of Rose, I can assert from pretty extensive trial, that in the acute inflammatory form of the disease, it is not only not injurious but indispensably requisite. On the subject of local treatment much contrariety of opinion has prevailed. Unctuous substances have been conceived to be injurious and have been accused of promoting the spreading of the affection. The

treatment of infantile Rose, if not absolutely empirical, is at least not regulated by general or precise principles. Of the treatment of the gangrenous form of the disorder nothing is known with certainty.

LEPROSY.

This is a perplexing complaint to treat, and the multiplicity of remedies which have been recommended from the earliest times *puzzles the practitioner considerably*. In analogous complaints, such as the various kinds of tetter, *the practice is just as uncertain*. The Lip-tetter, which is a very common form of the disorder, is generally very obstinate and *resists every mode of management*.

MILIARY FEVER.

For the extreme and alarming state of feebleness attendant on the miliary fever, several foreign authors have bestowed great commendations on such agents as musk, musk and cinnabar, and camphor. Such means I regard as *utterly inadequate to the end proposed*.

RINGWORM.

Ringworm and other forms of the fret-eruption run through a determinate course which *cannot be controlled or accelerated by medical means*. In the Herpetic ringworm [common to children and so frequently appearing in many of the same school or family at one time as to have been accounted contagious] solutions of blue-stone, and green

vitriol, or of alum or borax, have been recommended; but in general *the less they are interfered with they heal more rapidly*.

SMALLPOX.

When convulsions take place in this disorder it is conceived they are dangerous. Cullen and Sydenham represented *the only effectual remedy* to be a large opiate. Of this measure I not only disapprove but say that opiates are *injurious*.

Blisters have been recommended by Cullen and others in cases where inflammation of the throat and base of the tongue is indicated; but before and without blood-letting they are *injurious*, and afterwards they are often *useless*. Opiates, which have been *much used* in this stage, are SIGNALLY INJURIOUS.

Concerning the use of cathartics and free purging in the suppurative stage of confluent smallpox much difference of opinion has been entertained. The administration of cathartics was practised by Sydenham, though to a small extent. Morton was *decidedly hostile to it*; and it was again favoured and *strongly recommended* by Freind, Mead, Tissot, Baker, and Huxham.

In the most malignant cases it is *of little moment what is done*, and it would be better for the physician to do nothing, or merely to alleviate symptoms than to adopt means which may be useless or even injurious.

In the typhoid or nervous forms of the disorder, and in that with gangrenous spots, many physicians have recommended bark, serpentaria, contrayerva, camphor, musk, saffron, and other remedies of *supposed* tonic, antiseptic, and cordial properties. But when these symptoms have taken place, *neither bark, serpentaria, nor contrayerva; neither camphor, musk, nor saffron are of the smallest avail.*

The practice of puncturing and cutting the pustules was followed by the Arabians. In modern times it was practised and recommended by Marquard, Fortis, Holland, Sidobre, Senac, Tissot, De Haen, Van Swieten, and Wintringham; and opposed by Diemerbrœck and Ludwig.

ACNE [AN ERUPTIVE AFFECTION OF THE SKIN].

The treatment of this disease cannot be said to be well understood. It is a gross mistake to suppose the frequent use of purgatives *so much practised* both among professional and unprofessional persons is of any benefit.

WHITE SCALL [A DISEASE OF THE SKIN].

Medicines either external or internal are said to have no effect on this disease.

THRUSH.

The difficulty of curing this disease in certain circumstances and its frequency in particular situations

and localities, render it important to be aware of the means of *prevention*.

ULCEROUS SORE-THROAT.

A good deal of difference of opinion has been entertained upon the proper mode of treatment.

Calomel has been supposed both generally and locally to exert a specific influence in the cure of this disorder. Several facts, however, show, that locally it is of *no use*, and that generally it may be *injurious*.

CROUP.

For the introduction of calomel as a remedy in this disease we are chiefly indebted to the American physicians. But it has been ascertained that its exhibition in the manner specified is not altogether free from danger. It possesses a remarkable power of irritating the intestinal mucous membrane, and inducing inflammation with exhausting diarrhœa, and so great a diminution of the general strength as *sometimes itself to contribute to the fatal event*.

The sulphuret of potass has also been proposed, but *its safety may be justly called in question*. Similar objections are applicable to ammonia, the exhibition of which has likewise been recommended.

INFLAMMATION OF THE LARYNX.

Many put much faith in the use of calomel and opium. After, and along with blood-letting, it is useful, or rather, *not injurious*; but without it ut-

terly useless, and I have sometimes thought not free from danger.

CATARRH.

On the propriety of exhibiting opiates in the treatment of catarrh, some contrariety of opinion has prevailed; several maintaining that preparations containing opium are *injurious*, while others contend that the evils they produce are trifling compared with the effectual manner in which they allay irritation and abate the frequency of coughing.

CHRONIC CATARRH OR CATARRHAL CONSUMPTION.

On the proper mode of managing this disease professional opinion has varied much. The therapeutic method suggested by theoretical principles has been by no means attended with great or even moderate success. Hydrocyanic acid, preparations of iodine and of iron, and the resinous balsamic medicines have all been proposed and tried in succession with equal want of success. With Iodine there is *great danger of producing mischief*. The same may be said of the fumes of chlorine, which have been occasionally employed.

GASTRIC INFLAMMATION.

Opiates are sometimes useful, but they are by no means free from danger. In disorders of this class, *many* looking only to the dyspeptic symptoms, ad-

minister bitters, tonics, anti-spasmodics, and antacids. The whole of these remedies are *either useless* or EXTREMELY PERNICIOUS.

DYSENTERY.

In consequence of partial success, the use of mercury has been indiscriminately transferred to every form of this disease. But if we reason from the pathological process in which the disease consists, in our choice of remedial measures, mercury will be *the last to which we should have recourse*.

DELIRIUM TREMENS.

Some physicians maintain that the employment of spirituous or vinous stimulants are *indispensable* to the recovery of the patient. The whole of the American practitioners, with scarcely any exception, whatever be their differences in other respects, concur in *condemning* the use of these agents.

HYDROCEPHALUS.—[WATER OF THE BRAIN.]

This disease first attracted attention by being almost incurable. Blisters have long been recommended and employed, but their effect is ambiguous. Caustics are liable to similar objections. When physicians looked more to the effects than the intimate pathological nature of this disease the exhibition of diuretic medicines was believed to be not only appropriate but *absolutely* necessary. They were very rarely, however, attended with suc-

cess, and whatever alleviation they seemed to produce, almost never cured the disease. The great reputation of mercury requires that a few words should be bestowed on this remedy. By Dobson, Hunter, Haygarth, Percival, and others it was ordered in inunction till the mouth was affected, or it was given in the form of calomel by the mouth; and succeeding practitioners have imitated their practice with various success. In some cases, however, without being beneficial its exhibition has appeared to be followed by the *most pernicious* effects. Dr. Warren states that ten cases which he attended terminated fatally, though mercury was used in large quantities.

PUERPERAL FEVER.

Hulme and Leake, who first illustrated this disease by morbid anatomy, inculcated the necessity of treating it as an inflammatory complaint, and their views have been confirmed by the experience of Gordon, Hull, Hey, Armstrong, Lee, and Dewees. It is true they have been *opposed* by both the Clarkes, by Walsh, by Hamilton of Edinburgh, by Brenan of Dublin, and by several others of less note. Mercury has been very *strongly commended* by some French practitioners, but *no practitioner in this country has derived the slightest advantage from it.*

PARALYSIS.

Inflammation of the Spinal Chord.—Various applications to the paralytic limbs have been proposed

in the treatment of this disorder. Of this nature are the stimulating embrocations and liniments. *The employment of all these agents proceeds on an erroneous principle.*

QUINSY.

Some recommend the inhalation of warm water containing sulphuric ether, but it is a measure on which little reliance can be placed. When the tonsils threaten to suppurate *little can be done except leaving them to time.*

MUMPS.

It has been *supposed* that local depletion is unnecessary or *hurtful*, but if the pain be great it will always be proper. In the case of vomiting coming on *it is said* that sedatives and opiates are best, and that eccoprotics are unnecessary. *This, I think, is doubtful.*

INFLAMMATION OF THE LUNGS.

Several physicians have strongly recommended opium. Others, and among these, Cullen, disapprove of the employment of opiates, while the symptoms are still urgent. Dr. Hamilton, Dr. Armstrong, and others, adopted the practice of combining opium with calomel. We must not, however, listen to their unlimited and indiscriminate recommendation of calomel and opium. I have tried it several times in pure pneumonic inflamma-

tion, *but I never saw from its use those beneficial results which are represented.*

In the gangrenous form of the disorder *no remedies hitherto proposed have been of any use.*

INFLAMMATION OF THE PANCREAS.

The remedies for the abatement or removal of disease of the pancreas are *as imperfectly known as the symptoms and the causes of the disorder.*

INFLAMMATION OF THE KIDNEY.

Diuretics *have been recommended*, but these are of *no use or improper.*

INFLAMMATION OF THE PROSTATE GLAND.

The opinion that this disease is incurable, is still allowed too often to influence the practitioner. In his first publication, Home recommended the tepid hip-bath at 94° or 95°, but afterwards he expressed his conviction that warm applications are injurious.

Chronic prostate inflammation occurring in strumous subjects is in its commencement obscure. If its presence could be detected *it is not easy to say what would arrest or subdue the strumous action.*

OVARIAN INFLAMMATION, ETC.

A multitude of remedies have been recommended in this disorder, but the long list of remedial measures stated in books to have been used with

various degrees of success, only shows that they had been employed *without due attention to the correct diagnosis of the disorder and in a method altogether empirical.*

RHEUMATISM.

On the use of blood-letting in this disorder, the opinions of physicians have varied much. Sydenham allows that he had often regretted that it seemed necessary to employ large and repeated blood-letting, which *impairs the strength, and disposes to the attacks of other diseases.* Boerhaave, notwithstanding, recommended blood-letting. Huxham thought he could distinguish a particular order of rheumatic maladies, in which the lancet was *decidedly detrimental.* Heberden remarked, that he had learned, *by experience,* that copious and repeated blood-lettings were unsuitable to the majority of patients in this disorder. Drs. Fordyce, Willan, and Fothergill also maintained that blood-letting was detrimental, and accuse the evacuating mode of treatment of causing, in some instances, a *fatal termination.* For myself, I must say, I see decided reasons for the employment of blood-letting in the acute and sub-acute forms of the disorder.

The example of Sydenham, and authority of Cullen, condemned the exhibition of opium in this disease, and pronounced it *injurious in every stage.* But Heberden has said, that it proves a safe and effectual palliative.

Chronic Rheumatism is a most intractable disorder, and there is scarcely in the long catalogues of human ailments, a complaint *in which so many remedies are tried without permanent or material benefit.*

GOUT.

Various opinions have been entertained as to the propriety of adopting antiphlogistic measures, or proceeding upon the expectant system. It might be supposed that blood-letting is indicated to subdue inflammatory action. Many physicians, nevertheless, have been led to the conclusion that blood-letting is not altogether beneficial. Sydenham was averse to its use, and maintained that if it be always used in the paroxysms *it renders the gout inveterate.* Boerhaave admitted that though it reached not the seat and cause of the evil, it was sometimes *accidentally* beneficial. Cheyne had not the courage to resort to it. Dr. Thomas Thompson, on the other hand, taught that gout should be treated as inflammatory disorders, by blood-letting, cathartics, &c. Cullen expressed his opinion, that it could not often be repeated with safety. Rush of Philadelphia, Hamilton of Lynn Regis, Dr. Parry and Dr. Barlow of Bath, all strongly recommend blood-letting; and, again, most of the French authors, as Barthez, Guilbert, and Hallé reprobate it as a PERNICIOUS PRACTICE. Dr. Scudamore regards it as wholly unnecessary.

As respects the use of leeches, Scudamore states that, while their benefit is *very doubtful*, they are liable to be followed in gouty subjects, with erythematous inflammation of the skin, or even œdematous swelling with *permanent debility*. Paulmier, on the contrary, a French physician, trusted very much to the use of leeches, and apparently with success.

Several authors have been *equally hostile* to the use of purgatives, during the gouty paroxysm, as to that of blood-letting. Latham, Wallis, and Dr. Robert Hamilton resorted to them; and Dr. Sutton regarded purging as *the most powerful curative means that could be practised*.

In the latent form of the disorder, it has been believed that, in general, the best treatment consisted in supporting the tone of the stomach by means of tonics, but it is both unphysiological and unsafe *to employ tonics or stimulants of any description*. When the symptoms are those of gouty *angina pectoris*, it is difficult to say what should be done.

In the retrocedent or repelled form of gout affecting the stomach, it has generally been supposed to be advisable to resort to the diffusible stimulants, as strong wines, ardent spirits, opium, &c. *I cannot help thinking that the propriety of the whole of this practice is very questionable*. The use of these articles, indeed, is liable to convert the gout in the stomach into *gouty palsy* or *apoplexy*!

DYSPEPSIA.

Of many remedies and plans of treatment for the several forms of indigestion, few can be said to be invariably successful in all cases; and though one set of symptoms is relieved by one remedy, and another by something different, *the disease remains in a new form*; and the patient is teased and distressed between the relief from present evil and the apprehension of future suffering. The truth is, that medicine is of much less efficacy in the *removal* than in the relief of dyspeptic symptoms. Magnesia is much used by dyspeptics, and *much commended to their use*, but it is chiefly serviceable as a palliative, and the observations of Brande and Marcet show that its employment is *not free from danger*. The first object is to remove constipation, and it is of little moment what purgative be employed, provided the effect is accomplished. But whatever benefit may result from the use of purgatives, whatever advantage may be gained by increasing the appetite and removing disagreeable sensations, by means of tonics, alkalies, and other means of relief, MEDICINE IS NEVER ADEQUATE TO THE FINAL AND PERMANENT CURE OF THE DISEASE.

It is supposed that opium in general presents the most effectual means of assuaging the severity of the gastric pain in water-brash, and hence it has been *very frequently* resorted to. Its use, however, is *always* followed with the bad effect of enfeebling

the tone and energy of the stomach, and consequently rendering it *more liable to subsequent attacks of the disorder*.

PULMONARY HÆMORRHAGE.

There have been discordance and contradiction among physicians as to the employment of blood-letting, or the adoption of other means, for the cure of pulmonary hæmorrhage. Full vomiting was beneficially employed by Dr. Bryan Robinson, of Dublin, and his practice was advantageously imitated by Dr. Cullen; but the increase of the hæmorrhage, to an alarming extent, prevented him from continuing the practice. It is, perhaps, *not safe*, and is at best *but an equivocal remedy*.

ASTHMA.

The treatment of asthma has been varied, irregular, and not well ascertained. As the pathology is not clear, a rational method could not be easily traced, and the empirical methods which have been adopted have not been very successful.

DISEASES OF THE HEART.

In the chief diseases of the heart, although there is reason to believe that in the early stage the progress of the disorder may be retarded, *the natural tendency is to the fatal termination*.

DROPSY.

In the treatment of dropsy it has long been the practice to exhibit mercury. Its actual influence, however, over the dropsical process may be justly questioned. In many persons its exhibition is not free from danger. In children it sometimes induces fatal enteritis. We have seen it produce a fatal eruption of the skin where it was exhibited to remove universal dropsy; and in one of Dr. Crampton's cases, the blue pill taken for ten days was followed by violent swelling, and inflammation of the whole face, mortification of the integuments, and death in little more than eight days. In ovarian dropsy I believe it is of little moment what is done beyond the application of leeches to abate pain.

EPILEPSY.

The pathology of epilepsy is obscure and hypothetical, and the treatment has been too often *irregular, partial, empirical and unsuccessful*, or at least, uncertain.

TETANUS.

The treatment of tetanus has been as unsettled and irregular as the pathology is obscure and uncertain. The great part of the means employed *have been found miserably to disappoint the expectations entertained of them.*

TIC DOULOUREUX.

In the treatment of this disorder much unsteadiness and empiricism are perceptible; and *it is difficult to sketch any rational or successful method of management.*

The above selections refer, it will be seen, to almost every serious disease with which human beings are liable to be afflicted, and are such as to render remark unnecessary. They will be admitted by all as sufficient to settle the question in relation to which they were brought forward, and to show that the success and certainty of the present unsystematic mode of practice are not such as to warrant us in refusing an examination of the evidence brought forward against this neglect of system and in favour of the existence of an immutable law, governing the action of all remedial agents.

CHAPTER II.

ON THE IMPORTANCE OF THE INVESTIGATION—FATAL CONSEQUENCES OF THE PRESENT MODES OF PRACTICE.

IN the foregoing chapter it has been shown that the alleged Homœopathic law presents nothing that is inconsistent with our general experience of the action of remedial agents, and that we have, consequently, no right whatever to refuse a consideration of the evidence in its favour, or to pass judgment upon its pretensions until that evidence has been weighed. It will now be desirable to point out that not only is Homœopathy thus entitled to claim a calm investigation before any opinion is pronounced regarding it, but that it is the urgent interest and duty of all, to promote such investigation by every means within their power.

Towards this end it is proposed to show, that the evils of the present modes of medical practice are not merely of a negative, but of a positive kind. The statements already quoted go far to establish this conclusion; but additional illustrations may readily be found, and the point is one of so much importance, that it cannot be too prominently en-

forced. If it could be proved that medicine always produces a good effect, so far as it produces any, there might then be some plea for indifference in promoting an inquiry into the real condition of the art, since, however much we might deplore that so little can be done, we should feel that in endeavouring to obtain such benefit as could be gained from it we were, at all events, free from the danger of causing absolute injury either to ourselves or others. So far, however, from this being the case, it is certain that medical treatment, as it is ordinarily conducted, must always lead to positive results—that is to say, either to injury or benefit—and that in most cases, even where benefit is produced, the advantage must be alloyed by the property of the medicine to generate some new, though perhaps lesser evil.

From the quotations in the preceding chapter, it might be inferred that the student in medicine, perplexed by the contradictions presented to him regarding almost every agent he is called upon to use, would at length fold his arms in despair, and in a majority of cases forbear to act at all. Perplexity of this kind is, however, rarely acknowledged. Despite the contradictions exhibited, in other respects, there is in a very large class of cases a tolerable conformity of opinion regarding the necessity of blood-letting and mercury, (the former being relied upon to cut short all inflammatory diseases,) and hence the doubts of the practitioner, as to the course

to be pursued are in many instances considerably mitigated. According to Dr. Armstrong, "bleeding is the right arm, and mercury the left arm of medicine." As regards other remedies, the remark previously made must be borne in mind, namely, that writers on the practice of medicine forbear, for the most part, from all allusions to the opinions of their predecessors or contemporaries, and prescribe dogmatically the treatment of diseases, leaving the student to discover how far those prescriptions are likely to succeed. If, therefore, following the advice given by a high medical authority, the student confine himself to only "one work on the practice of medicine," he will not feel those doubts which would arise from a more enlarged course of reading; and even if he should take the trouble to examine and compare the opinions of various writers so as fully to detect their contradictions, the chances are, that, from amongst the various authorities, he will select for his guide one whose style most commends itself to his mind, and in following the instructions of this authority, rest satisfied, whatever may be the result, that he has not acted recklessly. Supposing him therefore called to treat a simple case, such as hooping cough, and that with a view to refresh his memory, he were to turn to his one practical volume and find such a paragraph as the following, in relation to this disease, namely,

"Prussic acid is one of the best things. It will not cure the disease, but it does remedy spasmodic

irritation of the air passages exceedingly well; and very often better than other narcotics;" or that, in a more serious case, such, for instance, as inflammation of the kidney, he were to find the following,

"The treatment of the disease consists in bleeding at the arm; cupping on the loins,—either alone or after general bleeding; and purging, especially by calomel; putting the patient into a warm bath; and low diet. If the kidneys suppurate, it is necessary to treat it as any other suppuration. We must support the strength, tranquilize the patient by anodynes, and perhaps give "*uva ursi*." Some recommend this drug; but whether it has any particular virtue, I do not know"—*

he would observe here that no perplexities are expressed, and, in the first case, as a matter of course, would give prussic acid if spasmodic irritation presented itself, and in the second, after the free use of blood-letting and mercury, he would doubtless *try* *uva ursi*. It is therefore vain to expect the majority of medical men to forbear from all action, except such as they are *certain* will prove beneficial. Original minds might pursue such a course, but the mass are always disposed to follow precedent, and in every case it is more pleasant to persuade ourselves that we are doing something, than humbly to acknowledge ourselves altogether in the dark.

Persons therefore once under medical advice are,

* Principles and Practice of Medicine, by John Elliotson, M.D.

for the most part, sure to receive *positive* treatment. Mercury and blood-letting, in the majority of cases, and in other cases such medicines as may be in vogue for the time, or as may be recommended by the particular authority whom the practitioner happens to have selected as his model. Now with regard to the effects of calomel and the lancet, it is very generally admitted that even where they arrest the disorder for which they are used, the patient is always a sufferer from their employment,—that although they may in some cases remove an urgent evil, they always leave a new one in its place. Ample testimony of this, with regard to blood-letting, has been long furnished in the anxiety with which medical men seek to find a substitute for its employment. Its evil effects have also been unequivocally acknowledged in some instances, even by those who, in general, have most strongly contended against timidity in resorting to it. Thus Dr. Elliotson observes, when alluding to the post mortem appearances of the alimentary canal in certain cases of disease: “It may happen that the bleedings which were instituted have taken away the redness of the part, and left it perfectly pale; although the powers of life were destroyed by the disease, or (as in some cases,) *by the remedies,*” and again, “In the majority of continued fevers which I see, venesection is certainly not necessary, and I am sure that those who employ it extensively in this disease, if they do not *destroy* their patients, yet pro-

tract their cases." Sydenham, as we have seen, admitted that it "impairs the strength, and disposes to the attacks of other diseases;" and Cullen affirmed that "it could not be often repeated with safety, both because it enfeebled the tone of the system, and tended to produce plethora." Dr. Holland asks, "Is not depletion by blood-letting still too general and indiscriminate in affections of the brain, and especially in the different forms of paralysis? Theory might suggest that in some of these cases, the loss of blood would lead to mischief. Experience undoubtedly proves it, and there is cause to believe that this mischief, though abated of late years, is still neither infrequent nor small in amount." In the *Cyclopædia of Practical Medicine*, (Art. Blood-letting), it is stated, "Amongst the effects of loss of blood must be mentioned that of *sudden and unexpected dissolution*. The patient does not recover from a state of syncope; or, without syncope, he may gradually sink after blood-letting. This event is particularly apt to occur if the patient be bled in the recumbent position. *It has taken the most able and experienced practitioners by surprise.*" Finally, the following remarks by Dr. Tweedie, will illustrate the way in which it is sometimes used, until experience (that is to say, until the death of many human beings,) testifies to its impropriety. "Dr. Gordon, Mr. Hey, and Dr. Armstrong, the advocates for large bleedings in all cases, *because they happened to see epidemics that would bear it, and demanded it,*

have said that the mortality of the low puerperal fever of London must have arisen from timidity and not pushing bleeding to a sufficient extent. The earliest experience of the writer in puerperal fever was in two distinct and well marked epidemics in the spring of 1822. From the decided advantage of copious bleeding in the first we were naturally led to push what is called bold practice in the first cases of the second, but *the result soon proved our rash mistake*. These adynamic cases will not bear bleeding favourably."

But seriously as these statements affect the "right arm of Medicine," there are others, if possible of a stronger kind, in relation to the "left."

Some of the most striking consequences of the action of mercury are mentioned by Dr. Craigie in his description of an eruptive disorder termed yaws, which has a resemblance to small-pox and occurs among Negroes. "It has long been the fashion," he says, "with many practitioners in the West Indies, to administer mercury in this disease, in large doses. The effect of this is first to cause the sudden disappearance of the eruption, and afterwards to induce a broken or declining state of health, accompanied with dropsy, general wasting, and sometimes the formation of incurable ulcers in various parts of the body. In this manner, too, king's evil in various forms, leprosy, and even cancer, are said to be produced." The same author speaks of its remarkable power when administered

in large doses of irritating the mucous membrane of the intestines, and producing so great a diminution of general strength as to lead to fatal results. Solis speaking of its administration in cases of hydrocephalus, states "many times I saw under large and long continued doses of calomel the hydrocephalic symptoms suddenly vanish and inflammation of the intestines arise and terminate in death." Its occasional effects in the treatment of dropsy have already been pointed out.* In a paper by Dr. Wells in the *Medico-Chirurgical Transactions* it is observed, that "the constitutional irritation caused by mercury may be followed by well marked symptoms of locked jaw." There is also, he says, a form of cutaneous disorder induced by this medicine which sometimes proves fatal. "Every now and then when persons have taken mercury, they have been seized with great heat of the skin and feverishness. A number of vesicles have appeared. They have spread all over the body; the cuticle has come off; fluid has exuded; and the irritation been so great as to make the patient quite wretched. At the same time, the mucous membrane has become affected; and there is almost always cough. This, however, is not all. I have seen more or less disease of the throat; and frequently vomiting and purging;—owing to the mucous membrane which runs from the fauces down into the abdomen, having also been affected."

* Page 29.

According to Dr. Christison, "death may ensue from the mildest preparations and from the smallest doses in consequence of severe salivation being produced by them in peculiar habits." Dr. Elliotson says "it is *very common* to see persons who have been in the foul wards of an hospital and undergone a considerable administration of mercury fall into a state of phthisis." And the same author speaking of organic disease of the liver, for which mercury is so commonly administered, further remarks, "we *frequently* break up the patient's constitution without affording him relief." Of the blue-pill he asserts, "If Mr. Abernethy had lived for a hundred years, and done good all the time, he would not have atoned for the mischief he has done by making people take blue-pill. Half the people in England have been led to fancy that they cannot live without blue-pill; which not only does no more good than any other purgative, but likewise renders those who take it constantly susceptible to cold; and must altogether be very injurious."

Finally, from Dr. Marshall Hall in his work on the Diseases of the Nervous System, (Par. 736) we have the following remarks, which apply alike to the "right-arm" and the "left."

"Of the whole number of fatal cases of diseases in infancy a great proportion occur from this inappropriate or undue application of exhausting remedies. This observation may have a salutary effect in checking the ardour of many young practi-

tioners, who are apt to think, that if they have only bled, and purged, and given calomel enough, they have done their duty; when, in fact, in subduing a former, they have excited a new disease; which they have not understood, and which has led to the fatal result."

It will be seen, therefore, that while with regard to almost every agent except mercury and blood-letting, there is avowedly the greatest contrariety of opinion, the uncertainty being not merely as to their doing any good, but as to whether they do not produce the most "pernicious results," it is a fact that these two means, on the use of which alone an approach to unanimity prevails, are very generally recognized as capable but of substituting under the best circumstances, one evil for another; and that although they may, and in many instances do save life, it is too often only on conditions that must render it a burthen:—that not unfrequently, being used where nature herself could have worked a restoration, they leave their consequences without having performed so much as a temporary service—and that also in a large number of cases, which furnish "experience" to the practitioner, the evil of their action is not even thus far limited, but results at once in the destruction of the patient.

Yet strong as is the evidence just quoted, together with that furnished by common experience, there is reason to believe that the deplorable consequences constantly produced by medicines as they

are ordinarily used, are scarcely, in any quarter, fully estimated. Even where their administration is rapidly followed by an unfavourable change, it is rarely that either the practitioner or the friends of the patient will permit themselves to suspect this event to have arisen from any other cause than the irresistible progress of the original disease. The practitioner, under such circumstances, feels satisfied that he has pursued the course recommended by the authorities for whom he has most respect; and even if he were to admit the possibility of the fatal termination having been caused in one case by the remedies administered, he would console himself with the reflection that these remedies had in other cases led to recovery; that, perhaps, where one life had been lost two had been saved, and that, having adopted the course which gave the most favourable *chance*, he is not called upon to proclaim the unfortunate result, and thus to weaken the general confidence in a medicine which more frequently saves life than destroys it. On the other hand, the friends of the sufferer, with the natural desire to escape regret where regret would seem profitless, eagerly shut out from their minds all questioning as to whether, under other circumstances, a different result might have been attained.

But when, as in a large majority of cases, the evil consequences are not immediate, they are still less likely to be traced to their real source. In this

country especially, where an idea seems to prevail that medicine may almost be digested, and that, like food, it should be taken in large quantities and of a substantial kind, the thought of its penetrating the system, and, by its latent powers continually undermining the constitution, appears seldom to be entertained. The man who, in mature life, finds himself the victim of a chronic malady, threatening to embitter the remainder of his days, is for the most part satisfied to refer to its merely proximate cause—in nine cases out of ten, the anxieties of business, without ever dreaming that the morbid irritability which rendered these anxieties overwhelming, might possibly be traced to some illness of which, by a liberal administration of medicine, a “cure” had been effected ten or twenty years ago; and even if, in addition to his own case, he were to see his children, despite the vitality of youth, vainly struggling against some poisonous taint, which, after having manifested itself in eruptive disease, had at length been accidentally repelled, he would probably find it no less difficult to recognize the possibility of this taint having been transmitted, and as arising from those poisons to the action of which, so many years before, he had himself been subjected.

The extent to which this chronic action may affect the system has, in some cases, been strikingly shown. It is not, therefore, the exhausting effects of active medical treatment, fatal as these sometimes are, that are chiefly to be dreaded. Some of

the medicines in frequent use, mercury, iodine, fox-glove, &c., possess the power of accumulating in the body, and then suddenly breaking out with dangerous or fatal violence, so that although the patient may appear for some time able to undergo the use of them with impunity, he may, sooner or later and when least expected, find himself the victim of a new disease, more intractable perhaps than any other, because arising from a cause which penetrates every organ of his frame. "The secondary and chronic effects of mercury," says Dr. Christison,* "are multifarious," and "there is hardly a disease of common occurrence which has not been imputed, by one author or another, to its direct or indirect operation." With regard to mercurial salivation, he asserts that there appears to be hardly any limit to the time this affection may last, after the administration of mercury has been abandoned; and he quotes, from various authors, many remarkable illustrations of its power of infusing itself into the system. Bruckmann, he says, mentions the case of a lady who, subsequently to a course of mercury, remarked after a dance many small black stains on her breast, and minute globules of quicksilver in the folds of her linen. In the *German Ephemerides*, it is said, that no less than a pound of it was found in the brain and two ounces in the skull-cap of one who had been long salivated; and although Dr. Christison seems scarcely able to credit this state-

* Christison on Poisons, 3rd Edit. p. 377.

ment, it is strongly supported by more recent facts. In *Hufeland's Journal*, it is mentioned that a skull found in a churchyard contained running quicksilver in the texture of its bones; and an unequivocal circumstance of the same nature has been related by Mr. Rigby Brodbelt. Dr. Otto also supplies an equally unquestionable statement. On scraping the periosteum of several of the bones of a man who had laboured under syphilis, he remarked minute globules issuing from the osseous substance, and in some places, when the bones were struck, a shower of fine globules fell from them. Wilmer likewise observes that Fricke, surgeon to the Hamburg Infirmary, has obtained mercury by boiling the bones of persons who had long been under a course of mercurial inunction. With regard to iodine, also, Dr. Christison quotes some fatal cases. Dr. Rivers, an American physician, he says, has twice noticed barrenness, apparently induced by its prolonged use. Dr. Jahn specifies, among the leading effects of the poison when slowly accumulated in the body,—absorption of the fat,—increase of all the excretions—dinginess of the skin—lividity of the lips—feebleness of the pulse—impaired digestion, and diminished secretion of saliva and mucus. The doses required to produce these effects are very various; but Dr. Gairdner is quoted as having seen severe symptoms commence when no more than half a grain was taken, three times a day, for a single week; and Coindet, as having seen bad effects from thirty

drops of the solution of ioduretted hydriodate, taken daily for five days. Of the cumulative effects of foxglove fatal instances are likewise detailed. Regarding nitrate of silver, a case is mentioned from Wedemeyer, in which, after that medicine had been taken for six months on account of epilepsy, the whole internal organs were found, upon a post mortem examination, more or less blue, and metallic silver was discovered in the pancreas, and in the choroid plexus of the brain. Dr. Pereira, speaking of the same medicine as a remedy for epilepsy, says, "In some cases the patients have been cured of the epilepsy for which they took the medicine; in others, the remedy has failed. In one instance, which fell under my notice, the patient, a highly respectable gentleman residing in London, was obliged to give up business in consequence of the discoloration produced by it; for when he went into the street, the boys gathered around him, crying out, 'There goes the blue man!' A case is mentioned in the *London Medical Gazette*, of an epileptic who was "cured" by nitrate of silver, but eventually died of diseased liver and dropsy: "all the internal viscera were more or less blue."

Some further remarkable circumstances connected with the retention of drugs in the human system, are mentioned by Mr. Beamish, in a narrative of a visit to Gräfenberg.* "The injury inflicted on the human constitution," says that gen-

* The Cold Water Cure, by Richard Beamish, Esq., F.R.S.

tleman, “ by the administration of drugs is still scarcely comprehended. A remarkable case, which may throw some light on the subject, was stated to me by eye-witnesses:—a gentleman nearly sixty years old, who had, twelve years before, severely sprained his knee-joint, for which two ointments had been rubbed in, the one blue, the other pink, placed himself under the water-cure. The functions of the knee were pretty well restored. After five months water-treatment the pain in his limb returned with considerable violence; to alleviate his sufferings, *umschlag*, or covered wet bandages were applied, when, behold! they quickly became impregnated, first with the blue, then with the pink deposit, after which the pain left him. Pink deposits I have seen on the linen of more than one individual. I possess seven samples of linen which had been applied to crisis, impregnated with deposits of black, black and yellow, light yellow, and bright sulphur yellow. The black was preceded by a blue which was, unfortunately, thrown away. The blue and black are declared by Priessnitz to proceed from mercury; the yellow from sulphur. The gentleman from whom I obtained them assured me that the mercury had been taken about twenty-eight years before, and the sulphur at two different periods of ten and twenty years respectively; and he added, ‘ Since I took the mercury, I have never enjoyed health.’ ”

With regard also to the retention of medicinal

agents in the alimentary canal some curious facts are upon record. It is remarked by Dr. Elliotson, "When a person has taken a great quantity of chalk-mixture, and even magnesia, concretions have sometimes been formed. In the Museum at St. Thomas's Hospital, there is a preparation where the intestines of a child are completely blocked up with magnesia. It has the appearance of hard mortar, regularly cemented. The same effect will sometimes take place with the sesquioxide of iron. Dr. Barlow of Bath mentions a case where pills of sulphate of iron were discharged nine months after they had been taken."

What has now been stated will render it evident, that from a resort to medical aid one of the three following circumstances will in a majority of cases take place; namely, a complete or partial cure, with the draw-back of some after-suffering from the remedies employed;—a failure of the remedies so as to leave the disease untouched, with the addition, at the same time, of evil consequences from the natural action of those remedies;—or, finally, such a disturbance of the system and weakening of the vital power as shall rapidly accelerate a fatal termination. Under the most favourable conditions therefore we have no promise of deriving a simple and unquestionable benefit. In the best case we can look but for an exchange of ills, however much in some instances that exchange may be in our favour; while under the two last suppositions the

prospect is one of little else than unmitigated injury.

At the same time it is to be feared an inquiry as to which of these results may most frequently be looked for, will not meet with any consolatory reply. On this point an examination of the contradictory statements quoted in the preceding chapter will throw some light; and the acknowledged "incurability" of a large number of diseases (among which are many of the most common) consumption — dyspepsia — hydrocephalus — cancer — hydrophobia — dropsy, &c. &c. furnishes sad experience in the same direction. The very rules, however, on which the present practice is professedly based would in themselves give sufficient testimony that uncertainty must at all times be its inherent characteristic.

When a physician observes for the first time the symptoms of his patient, his direct object is to form a clear idea of the organ or organs implicated in the disease, and next, to ascertain if the disease be of a passive or an inflammatory kind. This accomplished, he has, in a majority of instances, all that he requires as a groundwork for action. If inflammation be present, then a lowering treatment is indicated; and, in the opposite case, tonics and stimulants, together, in all cases, with a *trial* of such medicines as have been found to possess a power of action over the organs supposed to be affected.

Now if in each case, the precise organ or organs

affected could be confidently ascertained—if the nature of the affection, whether inflammatory or otherwise, could with like confidence be arrived at,—and if, after proceeding thus far, an equal certainty could be felt, that the medicines administered would produce the action for which they are given, there would be reason to hope for a satisfactory result. But, unfortunately, there is no sure method of attaining any one of these objects; and as correctness not merely in one but in all three of them together, is necessary to a cure, an unusual combination of intelligence is required before a favourable treatment can be looked for.

Of the various symptoms of disease there are a vast number common to affections of totally different organs; and there are others, as in the instance of diabetes, a disease which some declare to be situated in the kidneys, and others in the stomach, of which pathological research has not yet fixed the primary seat, so that although from long practice and acute perceptive powers, some practitioners may at times be enabled to form a singularly accurate estimate of the real situation of the mischief, such accuracy is by no means common;—a fact, which the experience of those who while suffering under long-standing maladies have consulted many different physicians will generally testify. With regard to the presence or absence of inflammation equal uncertainty has been found to prevail. The light in such an inquiry is often

derived chiefly from pathological experience, the result of observations made at post mortem examinations of organs in various stages of disease, such observations forming in each case the basis of a *theory* of the causes of the destruction which had been going on, and of the mode in which, when symptoms are again presented, such as those which had been manifested by the deceased persons, its progress should be resisted.

But although the facts which have been accumulated in this direction by the unwearied research of medical philosophers are surprisingly numerous, they have added little to the certainty of medicine, since the theories based upon them have in almost every case embraced the most opposite views, and have consequently been the cause of incessant warfare, characterized by the bitterness peculiar to disputes in which neither party feel it possible to demonstrate their position. The contests between physicians, whether certain diseases are inflammatory diseases or otherwise, have been endless (the mode of treatment indicated in the one case being diametrically contrary to that indicated in the other; so that, at all events, the patients of one of the contending parties must suffer not only from the absence of proper treatment, but from the infliction of its reverse), and every new observation in pathology seems only to be the signal for new contentions equally furious and resultless. Even, however, where practitioners are generally

agreed upon the nature of the indication, perplexities appear to be in no way diminished, and evidence is constantly presented that this unanimity is no safeguard against error. So all-pervading, in fact, are the doubts besetting this point, that practitioners evidently do not feel it expedient to bind themselves upon all occasions to act in conformity with rule. "In consequence of partial success," says Dr. Craigie, "the use of mercury has been indiscriminately transferred to every form of dysentery; but if we reason from the pathological process in which the disease consists in our choice of remedial measures *mercury will be the last* to which we should have recourse."

Upon the question whether (supposing the seat of the disease to be actually ascertained together with a knowledge of existing indications) the practitioner possesses the power of selecting medicines that shall accomplish the indications aimed at, difficulties are presented still greater than those which have just been considered. So little is known of the action of medicines that they very frequently produce a directly contrary result to that which is expected; and medical books will be found to contain expressions of surprise at the unlooked for phenomena constantly arising.

Thus it will be seen, that in medical treatment according to the recognized rules, there are three preliminaries necessary to insure success; that the accomplishment of one of these is of no advantage

without the accomplishment of the others, and that they each alike depend upon the practitioner being fortunate enough to form a correct theory in the absence of positive data. There must, first, be a correct theory as to the organ diseased;—then a correct theory regarding the mode of progress of that disease;—and, finally, a correct theory regarding the action to be produced by the medicine administered: and upon the chance of his achieving all these is to depend the benefit or injury he may cause. Upon the probability of correctness in a combination of *theories*, the practitioner, experienced or inexperienced, as the case may be (and the history of science as regards theoretical views, whether from the learned or unlearned, points to little else than error) is to administer agents, some of which, in the proportion of less than a grain have been known to destroy life,—and these, not to the healthy, not to those whose vital energies may quickly repair any accidental mischief, but to those whose powers are enfeebled, whose life may depend on the slightest casualty, and whom it is considered so necessary to guard from every disturbing cause, that we control in their presence even our slightest words, lest one breath of despondency or impatience on our part, or the mere excitement of some trivial news, should extinguish the feeble flame we are struggling to preserve. When we recognize these things and read afterwards that “upon one occasion seven persons were destroyed

in an hospital in Paris by a particular medicine (hydrocyanic acid) prescribed according to the usual rules," * instead of being surprised at such a statement we feel convinced, that if the daily aggregate of fatal results from medical treatment could be known, an incident of this kind would form comparatively an unimportant item.

And it must be remembered that it is not to the dangers of medicines alone that patients under these circumstances are subjected, but oftentimes to the shocks of torturing applications—that it is by the debilitated invalid, and not by the healthy man, that scarifications, blisters, moxas, setons, and incisions must be borne, upon the chance of the theoretical views of the practitioner proving correct or otherwise. “A lady, the wife of a physician,” says Sir George Lefebvre in his *Apology for the Nerves*, “lost all power of motion in consequence of a concussion of the spine; blisters, setons, frictions with tartarized antimony; and finally, the excruciating tortures of seven moxas burnt upon the sacrum at different periods, were all resorted to without effect.” This lady left off medical treatment and resolved on trying magnetism. A cure was immediately effected, which the *Medico-Chirurgical Review* is disposed to attribute entirely to her escape from her professional attendants.

With results like these constantly before us, the duty of addressing ourselves on all possible occa-

* Craigie's Practice of Medicine, vol. ii. p. 1010.

sions to an impartial examination of any new doctrine alleged to lead to a satisfactory system, and at the same time professing to be founded on pure induction, and, consequently to claim attention solely on the evidence of recorded facts, need scarcely be enforced. The question is not if the present modes of medical practice are to be utterly condemned as causing, in the aggregate, more injury than benefit, it is enough to show that in a vast number of cases they are productive of unmitigated evils—evils which could not arise if these modes rested on a scientific basis, and which therefore sufficiently indicate that the true principle of the healing art is yet to be ascertained.

That the discovery of this principle is destined to be effected is plainly inculcated by experience. The advantages which are supplied to the lower animals by instinct are to be attained by man by the exercise of his reasoning power; and the impulse which guides the dog bitten by the cobra de capella to the plant which forms its antidote, or which urges to its medicinal wells the diseased cattle of Llangan Schwalbach, is not given in order to render them in this respect superior to man, but because they are denied the higher intelligence by which man is to acquire a similar immunity, and the exercise of which in any direction invariably brings unexpected additions to his means of happiness. It is too true, that upon meeting with failure, the indolent and self-complacent are prone to solace

themselves by assuming that it arises not from their own lack of perseverance, but because in the nature of things success is not to be attained, and in no department of science has this depressing argument been more frequently resorted to than in medicine. Scurvy, which is now more easily controlled than almost any other malady, was formerly set down not only as a disease incurable then, but as one so formidable that it never would be cured. In like manner Sir James McGrigor in mentioning the absence, at present, of any remedy for tetanus, speaks of there being "little hope that it will ever be found out," and this with a knowledge that the disorder is not incurable, since recovery has been known to take place spontaneously. Similar expressions are constantly to be observed in the writings of medical men.

But those who are imbued with a sense of the unalterable tendency of science to lead from certainty to certainty—the view widening in an increasing ratio with each ascending step—will regard as treasonable to the cause of human progress each despairing cry that "the limit is attained." "It is a heartless apathy," writes Dr. Rogers, "equally unworthy of the philanthropist and the physician, that can look at the mass of disease yet unsubjected to the control of medicine without humiliation at its extent, and anxiety for its diminution: and who shall say that its diminution, nay its final extinction, may not ultimately be accomplished. There

are depths in science, and in medicine too, of which our present means of investigation only serve to show the profundity; but who will venture, either in the one case or in the other, to set bounds to the future advancement of knowledge?"

In search then of a true basis for medical science, self-love, benevolence, and hope, alike prompt us to unwearied efforts. Of those who are daily called from the world, the number dying of old age is small indeed, and each man must therefore recognize the probability that a time may come not only to himself, but to those for whose welfare he is especially answerable, when a continuance of life will depend upon the judicious application of the powers of medicine; and when, if contending doctrines be presented to him, it will be too late to decide upon their claims.

These considerations should also press on that large class of superficial persons, who, while they feel themselves both unwilling and incompetent to examine evidence on scientific points, are, nevertheless, apt for the sake of popularity to echo, as if from their own deliberate opinion, the prejudices of others, and thus to indispose persons over whom they possess influence—for the very weak find some still weaker to look up to them—from paying attention to the subject. The temptation of keeping on the safe side by refusing to recognize, or even to examine, a new doctrine until the majority have come over to it, is irresistible to those who do not

feel sufficient power to stand alone, and in yielding to the impulse, they incur no other charge than that of weakness. But when such persons cease to confine themselves to a mere reserve of judgment, and flippantly repeat as original, or quote with approbation the contemptuous remarks of a third party, it would be well, on all occasions, that they should be visited with reproof. If they feel themselves competent to examine the evidence in relation to it, it is their duty to do so, and not to give an opinion until the task be completed; and, if they do not feel thus competent, they certainly cannot be fit to judge of the competency of those whose sentiments they echo, since it is much easier to decide upon a plain statement of facts, than upon the existence of those intellectual and moral qualities which must be possessed by another, to justify us in adopting his judgment as our own.

The great obstruction to all new truths has arisen from this class; the weakest, but unfortunately the most numerous; and yet, so inconsistent are they, that while in their reckless vanity they pronounce opinions upon questions which involve the welfare of multitudes, and often, as far as their influence extends, cause the most deplorable consequences; they would not know a moment's peace if it could absolutely be made plain to their eyes that they were the authors of any fatal casualty. It is probable that many a person who, in the early stage of Jenner's discovery, may have prevented by a passing sneer, in uni-

son with the popular feeling of the day, some one from resorting to vaccination, who afterwards died of small-pox, at the same time spreading the contagion, would never again have passed a quiet night if he had run over a child, or set fire to a house, or committed any other fatal act, resulting from accidental causes which he could neither foresee or control, and not as in the other case, from a deliberate exercise of the will. It is not intended to assert that persons of this description are never to express their views, but, as when an opinion is positively set forth on an important subject, we naturally infer that it has been formed on some proper ground, it is a fraud to state anything dogmatically where this has not been the case, and it is their business, therefore, when they state that such and such is their opinion on any given subject (as it was the business of those, for instance, who stated their disbelief in the circulation of the blood or the use of vaccination), to add that they know nothing about it, or that their disbelief is merely founded on the disbelief of some one else, or upon the circumstance that the new doctrine is different from anything they would have expected. In such case no harm will be done, and no responsibility incurred. In the first instance, the acknowledgment of ignorance will deprive their opinion of all value; in the second, the quotation of their authority will prevent the opinion appearing to be that of two persons, when it is in fact only the opinion of one,—the other be-

ing merely an echo ; and in the third, as it is well known that “ upon experience the acknowledged constitution and course of nature is found to be greatly different from what, before experience, would have been expected,”* their statement would operate rather for than against the doctrine it is intended to refute.

Having thus attempted to show that there is no ground for refusal, or plea for indifference, it will now be our task to examine the evidence regarding the alleged homœopathic law, and the system of practice to which it has given rise.

* Butler’s Analogy.

CHAPTER III.

ON THE EVIDENCES OF HOMŒOPATHY.

THE only means by which, on any question of physical science, the highest certainty can be reached is by extensive experiments, performed by ourselves, or carefully detailed in all their parts by others upon whom we can rely. But indirect testimony may be so accumulated as to lead almost to certainty, and as it is never possible to estimate the amount of evidence which any one individual may require, it will be desirable for us, in an investigation like the present, not merely to limit ourselves to the direct testimony at command, but also to fortify our judgment with such collateral arguments as may most readily present themselves.

One of the most important of these, in connexion with an alleged discovery, is frequently to be drawn from a review of the circumstances under which such discovery may have been put forward; whether, for instance, it appear to have originated in a mind akin to those from which great truths have usually proceeded (and at the same time, even from such a mind, not to have been hastily proclaimed),

or to have been put forth as a sudden light by some undisciplined dabbler in science for the attainment of wealth or notoriety.

Now the whole history of the circumstances under which the homœopathic doctrine was presented to the world, is such as to win for it our favourable consideration. We find it originating in the patient research of a German physician, whose early genius attracted so much attention that he was withdrawn from trade to which he had been destined, to the more genial pursuits of science, and whose entire life, protracted through nearly ninety years, confirmed the promise of its commencement.

The circumstances of Hahnemann's career, detailed in the introduction, sufficiently establish the right of his disciples to claim for his statements and opinions the respect due to one whose whole energies were unceasingly devoted to science, and whose inquiries were conducted in the calm and cautious spirit of philosophy. It was in the day of his matured judgment that the first thought of his starting doctrines broke upon his mind—it was not till after six years of patient investigation that he gave them, even partially, to the world—and it was only at the period of his death that his labours in relation to them were closed.

But setting aside the claim to respect as founded on these circumstances, it may be sufficient to base it upon the fact that, apart from whatever fate may attend the doctrine of homœopathy, he is entitled,

upon the testimony of many of the first authorities in medical science, to rank side by side with Jenner, as a benefactor of the human race. The discovery of belladonna as a preventive of the scarlet fever, approaches in importance to that of vaccination, and that this discovery, proclaimed by Hahnemann, is actually to be relied upon, may be strongly inferred from the admissions of those by whom it has been referred to. "It is proper to notice," says Dr. Tweedie in the *Library of Medicine* "the supposed powers of belladonna in preventing the spread of scarlatina; a doctrine which Hahnemann of Leipzig was the first to advance in 1807. Observations on this interesting prophylactic measure have subsequently been made by Dr. Berndt of Castrin, by Dr. Dusterberg of Warberg, Dr. Bekr of Bernberg, by Professor Koreff, Hufeland, and Keingman of Berlin, and they *all* give testimony, more or less strong, as to the efficacy of this narcotic employed for the purposes suggested." With this testimony before us, strengthened by subsequent experience, it will be disputed by none but those who are unworthy to enter into the pursuit of science, that an immeasurable debt of gratitude is most probably due to Hahnemann; and that consequently the fact of any given doctrine having been promulgated by him, is sufficient to entitle it to full and respectful consideration.

But there is another argument bearing on this point, which, although derived from a branch of

philosophy at present too little understood to prevail with the general reader, must be accepted, as conclusive, by several scientific persons who have hitherto shown a determination, founded solely, as we are bound to infer, upon an unaccountable prejudice against the character of Hahnemann, to shut out all evidence in favour of his doctrines.

Among those who have most stubbornly refused an investigation of homœopathy, are the respective Editors of the *British and Foreign Medical Review*, the *Medico-Chirurgical Review*, and the *Lancet*,—the latter journal especially, having in its own characteristic way met the subject with abuse and denounced it as a “fraud.” Now these journals constantly take opportunities of enforcing upon their readers the truth of Dr. Gall’s discoveries regarding the physiology of the brain, and consequently that the moral and intellectual powers of individuals in a state of health are to be ascertained with considerable precision by observing their cerebral conformation. With regard to their estimate of the founder of homœopathy, however, they do not follow out what they so steadily inculcate. Portraits and busts of Hahnemann must frequently meet their eyes, and it is impossible for those having anything like a practical acquaintance with phrenology, to look at the size and general conformation of his brain, and not to recognize that he whom the *Lancet* denounces as having passed upwards of fifty years in the propagation of a fraud could have been aught

else, morally and intellectually, than one of the leaders of mankind. Not long ago Mr. Wakley, so much does he rely on his practical application of Dr. Gall's discoveries, took occasion, in the House of Commons, to express his reliance on Sir Robert Peel, merely from what he had observed of the shape of his head. But, without any disrespect to Sir Robert Peel, it may be affirmed that, if the Editor of the *Lancet* will procure a bust of that minister, and set it beside the well-known bust of Hahnemann by David, he will, while he expresses his confidence in the former, on the score of cerebral development, be led to doubt how far it may be expedient for his character as a phrenologist to revile the latter.

Another very striking testimony, of an indirect kind, of the truth of the Homœopathic doctrine, is to be found in the rapid manner in which it has extended itself. In the face of the most active opposition from the whole body of their colleagues (a body from their extent, the confidential nature of their duties, and their general attainments and knowledge of mankind, perhaps the most influential in existence) the few physicians by whom the doctrine has been recognized have been able to carry it over the globe. In Russia and India, and Australia, as well as throughout the whole of Europe, it already numbers adherents who by their aggressive tone show a reliance upon its ultimate triumph which tells unmistakably of its further propagation,—

while at the same time the theatre of its widest reception is found to be amongst the shrewdest, the most practical, and, on other than national points, the least prejudiced people upon earth,—the inhabitants of the United States.

There are many other points of a collateral nature, to which in the course of our inquiry it will be found expedient to refer. We will now, however, proceed to examine the direct evidence furnished by the results of Homœopathic practice.

This practice consists, as has already been explained, in administering for the cure of disease medicines which possess the property of exciting symptoms of a like nature with those which are manifested by the patient. It is well known, for instance, that *ipêcacuâna* is a powerful emetic, and that it is frequently used as a remedy for vomiting; that mercury has the power of producing symptoms so nearly resembling those of syphilitic disorder, as sometimes to render it difficult to discriminate one from the other, and that for the cure of syphilis, mercury is employed as a specific; that sulphur produces cutaneous irritation, while for cutaneous affections it is a well-known remedy; and that a like peculiarity in relation to the inherent property of the medicine and the symptoms of the disease for which it is used, is popularly recognized in many other cases. Now all these are direct instances of Homœopathic practice, and although they do not of themselves establish the

fact that all remedies possess the power of producing symptoms analogous to those of the diseases which they cure, they go very far in that direction. That which is observed to be an uniform characteristic of several different medicines we naturally infer, in the absence of proof to the contrary, may be a characteristic of all. If a traveller just arrived in a strange city were to remark that the first person he met bowed his head upon approaching towards him—that the second person, although very different in appearance, performed the same gesture, and also the third, fourth, and fifth, he would consider it to be highly probable that the sixth would do the same; and so when we find a certain peculiarity attend the action of sulphur, and the same peculiarity attend ipecacuhana, and mercury, although wholly different in other respects, we naturally ask if it will not be found to prevail with regard to rhubarb or plumbum, or magnesia, or any other medicine? Of course, if any clear proof already exist to the contrary, the inference of the operation of such a general law will not arise, but in the absence of such proof a reasonable person will always regulate his conduct upon the supposition of this inference being the correct one.

Now it will be found, that facts in confirmation of the Homœopathic principle rapidly accumulate in proportion as we extend our inquiries. The observation of them on the part of Hahnemann commenced in the instance of the action of quinine.

Struck, whilst translating the *materia medica* of Cullen, with the contradictory statements of the operation of Peruvian bark, he resolved to test it by personal experience, when finding it produce all the symptoms of that disorder for which it had been celebrated as a remedy, namely, intermittent fever, the idea of the possibility of a general Homœopathic law first dawned upon his mind. From the results of patient experiments, undertaken by himself and some devoted friends, and carefully conducted through a long series of years, the peculiarity which had been discovered to attach to the operation of quinine, of producing symptoms analogous to those of the disease for which it is a remedy, was found to attach also (as far as these experiments went) to every other medicine; and thus a mass of evidence was collected sufficient, in the absence of opposing facts, to lead to a conviction that the property thus observed is an universal characteristic of remedial agents.

This is not the place to enter into a detail of these experiments. It is enough to state that they were not only extensive, but conducted with every precaution likely to occur to persons habituated to careful observation. They are open to all inquirers, and until we can refute them by well sustained evidence, or show that they do not warrant the inference deduced, we are bound to receive them as clear and direct testimony in favour of the existence of a Homœopathic law.

But it is not merely upon these experiments that the truth of Homœopathy rests; they formed the ground of belief on which the early disciples of the system took their stand, but that system has now been long enough in practical operation to exemplify the truth or falsehood of the principle on which it proceeds. Statistical reports duly verified, showing the comparative results of the Homœopathic and Allopathic treatment are now to be had from many of the chief cities of Europe and America, embracing a sufficient number of cases to enable all those whose minds are open to evidence of any sort, to arrive at a definite judgment upon their respective claims. Of these statistics the most important perhaps, are those which refer to the treatment of cholera, the results thus obtained having produced the first strong popular impression in Europe of the efficiency of Homœopathy. The high rate of mortality in the cases of epidemic cholera which occurred in Europe in 1831 is well known. "As respects this country," writes Dr. Elliotson, "I cannot but think, that if all the patients had been left alone the mortality would have been much the same as it has been; for we are not in the least more informed as to the proper remedies than we were when the first case of cholera occurred. Some say they have cured the disease by bleeding; others by calomel; others by opium; and others, again, say that opium does harm. No doubt many poor creatures died uncom-

fortably, who would have died tranquilly if nothing had been done to them.”—While Dr. Joseph Brown, by whom the course of the disease was observed at Sunderland from its commencement in October to its cessation in January, states the mortality to have been 202 out of 534 attacked, or 38 per cent, and he speaks of a mortality of only $22\frac{3}{4}$ per cent in the epidemic which prevailed in the Presidency of Madras from 1818 to 1822, as “a proud monument to the skill of the medical men employed, and to medical science in general.” Now the results of the Homœopathic treatment of this disease in Europe in 1831, show a total of 2753 cured out of 3017 persons attacked, being a mortality of only $8\frac{1}{2}$ per cent, and must be held therefore, if the eulogium of Dr. Brown on the practitioners of Madras is in any way deserved, as a “proud monument” of the skill of the Homœopathic practitioners and to the “science in general,” by which their practice had been guided.

It will perhaps be urged that, as the mortality of cholera varied much in different localities, it does not follow but that the above cases may have been of a singularly favourable kind; but there is no reason whatever for such an assumption. The documents on which the calculation has been made were furnished from Russia, Austria, Berlin, and Paris; so that the treatment was evidently not confined to localities especially favoured; and, moreover, a statement has been furnished from the territory of Raab

in Hungary, where the disease raged with great violence, which serves to show the results of the Homœopathic and Allopathic treatment in the same district. This statement, which is said to have been placed in the public archives, by the imperial health commissioner, Count Franz Zichi Ferraris, is as follows :—

Number of patients treated, 223 ; cured, 215 ; died, 8.

The reports of the Allopathic physicians being, number of patients treated, 1499 ; cured, 853 ; died, 646.

Further evidence of the success of the system in the severest cases, is furnished by the reports of the Homœopathic Hospital at Vienna, showing a mortality in cases of inflammation of the lungs, of about $6\frac{3}{4}$ per cent. ; while the mortality under the ordinary method of treatment is about $23\frac{1}{4}$ per cent. ; in cases of inflammation of the pleura, a mortality of $1\frac{1}{4}$ per cent. against $12\frac{1}{2}$ per cent. ; and in inflammations of the peritoneum, $4\frac{3}{4}$ per cent. against $27\frac{1}{2}$ per cent.*

Thus much with regard to acute disease of the most malignant kind. With regard to the power of the Homœopathic system in chronic cases, the evidence appears to be equally strong. The London Homœopathic Institution, in its report of cases (both acute and chronic) from October 1839 to 1st May, 1845, shows a large number of cures of diseases, for the most part deemed incurable under the old sys-

* See Appendix A. Homœopathic Hospital at Vienna.

tem, and which cures, therefore, (the results of the ordinary practice not admitting of any *comparative* statements of mortality) are each to be taken as confirmatory evidence of the strongest description. The cases discharged cured from this institution, during the above period, we find to be,—

| | |
|--|-----|
| Cerebral affections, Apoplexy, Encephalitis | 42 |
| Epilepsy, Paralysis, Mental affections, &c. | 55 |
| Amaurosis, Deafness, Deaf and Dumb | 31 |
| Cataract, Fungus, and Fistula | 7 |
| Ophthalmia, and Scrofulous Ophthalmia | 63 |
| Gastritis (Dyspepsia) | 191 |
| Enteritis | 31 |
| Uterine, Ovarian affection | 87 |
| Gastro-enteritis | 94 |
| Gastro-entero-metritis | 57 |
| Gastro-entero-bronchitis | 210 |
| Pneumonia, Hydrothorax, Pleuritis and Bron- chitis | 57 |
| Hooping-cough | 40 |
| Phthisis | 75 |
| Dysentery | 36 |
| Quinsy, &c. | 14 |
| Cutaneous, Scirrhus, and Cancerous affections | 97 |
| Rheumatism, &c. | 21 |
| Erysipelas, Small-pox, and Scarlatina | 40 |
| Typhus Fever | 13 |
| Diseases of the Bladder, Kidneys, and Genital Organs | 5 |
| Mechanical Injuries, Bruises, Sprains and Spinal affections | 6 |
| Scrofulous affections | 39 |
| Syphilitic and Mercurial affections* | 50 |

Of these, it will be seen, a large proportion are

* Appendix B. Reports of the London Homœopathic Institution.

cases towards the cure of which the old practice is admitted to be powerless. Regarding epilepsy, for instance, it has been stated by one who was formerly physician to St. Thomas' Hospital,* "I know that most persons who go to St. Thomas's Hospital are *relieved*, but I believe none are *cured*." Of the various forms of dyspepsia we have the testimony of Dr. Craigie, that "medicine is never adequate to the final and permanent cure of the disease." Cataract, fistula, amaurosis, scrofulous ophthalmia, scirrhus and cancerous affections, are all known also for their unfavourable terminations; yet not only do these diseases appear to have been successfully dealt with, but we find also that in no less than seventy-five cases a cure has been effected of that disease which carries off one-fifth of our population, and which, more than any other, forms the opprobrium of medical practice. The number of cases of phthisis, in the above list, forms one of its most striking features, and is of itself a point of evidence entitling the system under which it has been furnished to the very fullest consideration.

It will perhaps be alleged that the fact of these cures being *reported*, is not to be taken as sufficient proof that they have really been effected, since eagerness on the part of the physicians under whose care the patients were placed, may have led them to describe cases as cases of phthisis which were not marked by the true symptoms of that disease. But this mode of meeting the question cannot be per-

* Dr. Elliotson.

mitted. The physicians by whom these cases have been put forth are duly qualified practitioners, and we have no more right, in the absence of any circumstances calculated to impeach their testimony, to question the correctness of their diagnosis in any given instance, than we have to question a diagnosis from the physicians to Guy's, or St. Bartholomew's, or any other well-known and popular public institution. If it had been alleged that the seventy-five cures above-mentioned had been produced under the old system of treatment, or by any mode which had been previously tried and found deficient, we should then be entitled to infer the statement to be an erroneous one, and that some error, either ignorantly or intentionally, had been committed by the practitioner, but where the cure has taken place from an entirely new method, of the results of which in this disease we have as yet no other evidence, we are bound to admit the statement with as much readiness as we should admit a statement from any other qualified practitioner, of a cure of any disease whatever. It is, unhappily, by no means an infrequent circumstance for those who are indisposed either to admit or to investigate any novel facts, to resort to this mode of evasion, but it is palpably mean and unjustifiable. To allow a practitioner, or a body of practitioners, to insinuate want of skill or honesty against a brother physician, without calling upon them to substantiate such insinuations, would be at once to check all advance in science, and to offer an

incentive to idleness and envy. When the specific action of quinine in ague was first discovered, those who employed it were denounced as murderers, and declared unfit to practice; and it is highly probable that when patients recovered, owing to its employment, recourse was had to the assertion that they had never suffered from ague at all, or that quinine had not been administered; so that if the insinuations of these parties had been tolerated as sufficient evidence against the plain statement of facts on the other side, an effectual stop would have been put to any further trial of the remedy. In the present case, moreover, such an argument would be especially unbecoming, because not only have the means of ascertaining the genuineness of the statement been furnished to the fullest extent, during the five years in which the cases have occurred, but the duty of the medical profession to avail themselves of these means has been urged from time to time as a prominent subject in leading papers, and cannot therefore have escaped observation.

It may possibly be alleged by some that it is more rational to believe a practitioner to be unskilful or dishonest, however high his previous reputation for talent and probity, than to admit the possibility of consumption being cured; and it must be granted, that when this opinion is stated as the cause, there can be nothing to prevent those who entertain it from openly disavowing a belief in the alleged facts. The public and the profession will

in such case form an estimate of the wisdom of the reason assigned. Those who take the depressing view alluded to in the former chapter, and habitually console themselves for failure in difficult diseases by the cry that cure is impossible, will, of course, not change their tone in such an instance as this; while others who hold that for every form of disease there is a remedy, if we had but skill to find it, and who are at the same time aware that a vast number of spontaneous cures of *organic* disease are upon record, and that even in the very case of consumption remarkable instances are known of the attempts of nature (not always unsuccessful) to produce cicatrization, and thus to heal up the injured parts, will readily recognize the possibility of cure. A conclusion, in fact, which merely goes to the extent that it is not quite preposterous to suppose nature and art combined capable of producing an effect which nature, unaided, has sometimes been able to accomplish—and in which, moreover, they will be well sustained by a study of the history of “impossibilities” from the commencement of the world.

The evidence with regard to the results of the Homœopathic treatment as derived from the list of cures just quoted, does not rest, however, merely on the cases of phthisis, or upon the correctness of the diagnosis of Homœopathic physicians. A very large proportion of the patients included in that list were the discharged “incurables” of the London

hospitals, so that if an allegation that the diseases have been wrongly described by the Homœopathists could be sustained, it would compromise to a considerable extent their Allopathic opponents. Another circumstance, strongly corroborative of the cures reported, consists in the fact, that of the total number of patients hitherto admitted, upwards of one-third, in order to gain the power of nominating themselves for treatment, have become voluntary subscribers to the funds of the Institution—a step which can only be supposed to result from a knowledge of cures effected. “It must be remembered,” says the address of the Institution, “that these persons chiefly belong to a class by whom little difficulty would be found in procuring gratuitous admission to the best hospitals or dispensaries of their several localities,—that not a single public advertisement has been put forth to arouse expectation or curiosity; and that the only cause which has led them to subscribe from their scanty means (and in a majority of cases to attend from great distances and at much suffering), has been the urgent recommendation of others by whom the benefits of the system had been experienced. Upon inquiry of the patients it would be found that there are few who are unable to quote some cure performed under their own observation as the first occasion by which even the existence of the establishment became known to them.”

Another important evidence in favour of Homœ-

opathy consists in the fact, that some of the remedies recommended by its practitioners are creeping into common use amongst the very persons by whom the doctrine is most violently assailed. The value of tincture of arnica, as a remedy for contusions, sprains, &c. was first scientifically demonstrated by the Homœopathists, and was put forward by them as one of the proofs of the existence of the Homœopathic law. In the ridicule directed against their doctrines no exception has ever been made in favour of arnica, but this medicine is now to be procured at a majority of the chemists' shops in London, where it is strongly recommended; and it is also known to be resorted to by surgeons for the very purposes pointed out by the Homœopathists.

A further proof in favour of the system is to be found in the palpable reliance placed in it by those who have had most experience of its results. If any misgivings were entertained by its practitioners, they would of course shun every step that might tend speedily to demonstrate whether the system be efficacious or not; and they would therefore endeavour to keep out of any direct contest with the old system, and to confine their practice to those lingering cases in which the consequences of a neglect of active means would least certainly be made apparent. But so far from taking this course, the practitioners of the system, and also its non-professional advocates, are observed to use every effort and to make large sacrifices of time and

money for the purpose of effecting that which if the system be founded in error, must tend more speedily to its overthrow than anything else, namely, the *gratuitous* reception at a public institution of persons suffering from acute disorders. The previous exertions of its practitioners in the treatment of epidemic cholera, which they might easily have avoided, also serves as an illustration of this peculiar kind of confidence—a confidence which has often been seen in those who have been supported by sincere belief, but which has never yet been really manifested by those who have doubted the truth of their own assertions.

Further evidence may be abundantly introduced, but it is hardly necessary. Enough has been stated to awaken the attention of those who are disposed to regard the subject with impartiality; and where this feeling is wanting no efforts will succeed. He who would dismiss such facts as those already stated by merely assuming their falsehood would still dismiss them if they were ten times multiplied.

It might be enough also to mention that the existing statistical reports of Homœopathic cures are already admitted as quite sufficient in amount to establish a strong impression of the validity of the system. We have the authority of Drs. Bostock, Forbes, Tweedie and Conolly, to this effect: “What objection,” say they, “can the man of mere experience, the rejector of all theoretical deductions, urge against the multiplied testimony that is now

presented to us in favour of the Homœopathic doctrine?"* They admit, in short, that the facts, as facts, might be regarded as proved, were it not for the circumstance that they are "in themselves incredible;" and as no reason is given *why* they are incredible, and as we have already in some degree shown, and shall still further show, that they are not only not in themselves incredible, but in harmony with reason and previous experience, this admission is all that can be desired even by the strongest upholder of the system.

Proofs, however, of the truth of Homœopathy are to be sought, not merely from the cures performed by those who recognize the system, but also in the successful cases of its opponents, and in much of the general experience of medical authorities. The cures of syphilis by mercury, of ague by quinine, of cutaneous disorders by sulphur, of vomiting by ipecacuanha, of burns by heating applications, &c., have been before alluded to, and are sufficiently familiar; but besides these common illustrations of the Homœopathic principle, there are a number of others to be gathered from scientific works, which, if all collected, would strike the inquirer with surprise at their variety and extent. In studying books on the practice of medicine, it must not be

* Cyclopædia of Practical Medicine. Edited by John Forbes, M.D., F.R.S.; Alexander Tweedie, M.D., Physician to the London Fever Hospital; and John Conolly, M.D., late Professor of Medicine in the London University.

supposed that there is never any relief to the doubts which beset the mind at each step as to the possibility of other diseases besides those above-named, being cured by specific means. Every now and then we meet with some case of complete cure by a method which puzzles the physician as being wholly "irrational," and which, although it does effect a cure, he is half disposed to discountenance, because it is empirical;—the application of the term "rational" to medical treatment being understood to belong to those methods which, even though they may utterly fail, have been adopted in conformity with some theoretical view, and the term empirical to those methods of which, albeit they may invariably *cure*, we are unable to form any theory whatever; so that frequently the most doubtful treatment is the rational, and the most scientific or certain the empirical. Of these empirical cures a few may be narrated. It will be seen that they each harmonize with the existence of a Homœopathic law. When we come to treat of the theory which the observation of that law suggests, it will then be time to inquire how far they can be elevated to the rank of "rationality;" whether they ever reach this dignity or not must, however, be a matter of secondary importance.

In an eruptive disease called the radesyge, or marsh sickness, endemial in various parts of Scandinavia and the north of Europe, the most prominent manifestation is frequently that of *unnatural hunger*; so that throughout its symptoms, which are of a

most appalling kind, and at last are those of well-marked marasmus, the appetite is not only not impaired, but is in some instances increased to an incredible degree, and forms perfect bulimia, or ravenousness. At the beginning of the present century the Royal Health College of Kanzeley, in a report on this disease founded on much experience, avowed that they knew no individual article of the materia medica possessing any exclusive operation over it, and recommended cleanliness as the best means of retarding an evil which medicine was inadequate to extinguish. After considerable observation, however, Dr. Ernest Henry Struve, a physician of Flensburg, seems to have discovered a remedy which, in relation to our present inquiry, is of a very remarkable nature. He found that the most uniform and efficacious mode of treating inveterate cases of radesyge was by observing a very abstemious course of diet, brought down at last almost to starvation; and this method of treatment he has termed HUNGER CURE. When Dr. Struve put forth his work upon the subject, he had tried it only three times: in two cases with *complete success*; and in the third, where the nasal bones were carious, although the final result was still doubtful, healing of the bones had taken place.

In this case it will be seen the cure was discovered by exciting an action analogous to that which characterizes the disease. It is important to observe that the action was not identical with, but *like*

to, that already in existence—the craving excited in one instance being abnormal or unhealthy, and in the other perfectly natural.

The following instance of a complete cure will appear no less remarkable than the foregoing.

There is a curious disease of the intestines, the symptom of which is a discharge of fatty matter from the alimentary canal. Sometimes the matter comes away in lumps, sometimes like melted butter. Dr. Elliotson had a case in St. Thomas's Hospital, of a patient who discharged one or two table-spoonsful of this fatty matter every day. It was voided like oil, but presently concreted. The question asked was, "whether he had taken castor-oil?" but he had taken nothing of the kind. "Mr. Howship," says Dr. Elliotson, in detailing these circumstances, "mentions the case of a lady who discharged a great quantity of this fatty matter, and she was cured by giving her *a pint of olive-oil*. That was an odd remedy. He says she was well from that day, though she had been long ill previously. As facts are stubborn things, I gave the man under my care four ounces of olive-oil; and the voiding of fat greatly diminished from that time, and soon ceased. Whether the circumstance was accidental or not, I cannot tell."

Another of these singular and "empirical" methods of cure may be mentioned in the circumstance that the form of St. Vitus's dance, known in Italy under the name of *tarantismo*, and which is

characterized by leaping and *dancing*, is alleviated and sometimes removed by the modulated tones of a violin, a guitar, or any other musical instrument. In one case, said to have been reported in the *Medico-Chirurgical Transactions*, a drum was the instrument employed. It was, in fact, from its leading symptom and the singular method of cure resorted to, that the disorder derived its name. Horstius states that certain women in Germany were affected with restlessness of body and disorder of mind; and went annually to the chapel of St. Vitus near Ulm, where they danced night and day till they dropped down exhausted. They then remained till the following May, when the affection returned, and they went through the same ceremony.

The effects of fruit, and particularly of grapes, in producing a disorder analogous to ordinary dysentery, are well known. There is a story, however, related by Zimmerman, of a whole regiment in the south of France, in 1751, being nearly destroyed by dysentery, when at length the disorder was completely arrested, owing to the officers having purchased the entire crop of several acres of vineyard for the use of the regiment. Not a single case occurred from that time. Tissot, a French writer, also mentions that eleven persons in one house were attacked with dysentery. Nine of them ate fruit and recovered; the other two had wine and spices instead (in accordance with the "indications?") and

both died. It was observed in Holland that the worst flux ever known in the army occurred at the end of July, when there is no fruit there but strawberries, of which the men never partook; and that the disease ceased entirely when October arrived, and brought the grapes of which the men ate very heartily.

And not only are instances of this kind to be readily found, in which the means of cure seem to have been hit upon by chance, and to puzzle medical practitioners by their singularity, but abundant examples may be presented where physicians have absolutely *selected* Homœopathic remedies, and for which selection the fact of their being Homœopathic seems almost to have furnished the only reason. Thus, in regard to the treatment of smallpox, Dr. Craigie writes, “where *sickness and vomiting* are urgent, an EMETIC of one scruple of ipecacuana will be useful.” And afterwards treating of whooping-cough, he recognises the Homœopathic principle with regard to the same remedy, as directly as if he were a thorough disciple of the system. “When the cough is fully established, but the expectoration remains scanty and difficult, the exhibition of emetics *in imitation of the spontaneous vomiting* which often terminates the fit, is found of the greatest benefit.” Again, speaking of the topical agents found useful in ulcerous sore throat, such as chlorine water, nitrate of silver, &c., another medical writer, M. Bretonneau of Tours, mentions

his belief that these agents produce their beneficial effects “*by inducing another form of inflammation, which arrests the progress of the specific form affecting the mucous membrane,*” a recognition of the Homœopathic principle no less clear than that on the part of Dr. Craigie. Cullen also, in cases of dysentery, recommends moderate doses of purgative medicines, and states his belief that, whenever in this disease *lavatives* produce their natural effect, they will be sufficient to achieve a cure.

As a remedy for the burning pain of gouty joints, Hippocrates prescribed raw flax to be ignited in the neighbourhood of the diseased parts. The Chinese and Japanese too, it is said, have been long in the habit of burning over gouty joints the downy matter of a species of artemisia called *moxa*, the remedy being afterwards introduced into Europe by the early Dutch practitioners, by some of whom the certainty of its effects is spoken of in the highest terms. Again : it is believed that porter and strong malt liquors are among the chief causes of cerebral congestion ; and Dr. Elliotson mentions that in some cases (and it may be inferred in those which have not been caused by these liquors) “where there is mild delirium, *porter* may be given, for it will frequently stop the disease.” In the treatment of ischuria, *cantharides* has frequently proved successful; the strongest symptoms of which disease Dr. Pereira describes this medicine as hav-

ing the property of producing. Epilepsy, it is well known, is frequently caused by fright; and we find that where it arises from some other cause, fright will operate as a cure, by its property of producing analogous symptoms. The disorder once pervaded a whole school in Holland in consequence of imitation. One of the boys had epilepsy, and the whole school became epileptic. The boys were eventually arranged all round the room, and were told that the first who fell in a fit should be flogged. This put a stop to the disease. Boerhaave, under like circumstances, prevented the recurrence of epileptic attacks by ordering a red-hot iron to be applied to the person who should next be affected. It is known also that mineral poisons will produce this disease; and in some cases nitrate of silver, iron, the preparations of copper, sulphate of zinc, the oxide of tin, and also arsenic, have been found specific remedies. From acetate of lead also in large quantities persons will become epileptic; and Dr. Rush of America affirms that acetate of lead has very great power over the disease. Dr. Fletcher mentions that palsy may be both caused and cured by a stroke of lightning. A tobacco clyster will sometimes occasion tetanus; and instances are recorded where by an injection of tobacco the patient has done well. The occasional successes also of opium in peritoneal inflammation, of the same medicine in delirium tremens, of strychnia in cases of palsy, of the Indian tobacco (*lobelia inflata*) as a

remedy for breathlessness, of turpentine in chronic inflammation of the bladder, and of a vast number of other agents recommended in the treatment of various diseases, seem best to be accounted for by a recognition of the Homœopathic principle, and at all events, as far as they go, tend strongly towards its confirmation. To these may be added a great number of popular, or what are called old-women's remedies, such as snuff in cases of sneezing, salt to alleviate thirst, &c. &c., all of which are important, since, nine times in ten, vulgar experience is correct; and it is therefore a good sign for any new doctrine when it unexpectedly derives confirmation from this homely source. The use of spices and fruits, such as pepper, nutmegs, carraways, mustard, onions, &c. by the inhabitants of the torrid zone, to remedy the debilitating effects of heat may also be quoted among this class of illustrations.

Hahnemann in citing examples of Homœopathic cures alludes to the English sweating sickness of 1415. This disease was so fatal that it killed 99 out of 100 affected with it; but after all other means had failed, it was subdued by the use of sudorifics. He also points to the cures of hydrophobia, asserted to have been effected by Sir Theodore de Mayerne, Münch, Buchholz, and Neimicke, by means of belladonna,—a medicine which produces difficult respiration, burning thirst, eyes fixed and sparkling, a horror of liquids, and an eager desire to bite.

There are other sources also, and, if possible, of a more comprehensive kind than any we have yet examined, whence, if Homœopathy be a truth, we must expect to draw evidences in its favour. Looking at the general harmony found to prevail in the government of the world, it may be anticipated that the Homœopathic principle, if it really have an existence, will prove to be universally applicable, and consequently to bear upon moral no less than upon physical conditions. A little consideration will show this to be the case, and at the same time present the subject in its highest and perhaps most interesting aspect.

The treatment of moral disorders, either by Antipathic or Allopathic means,—that is to say, by opposing the symptoms, or endeavouring to excite new ones having no relation to those already in operation,—has constantly been found to fail.

For centuries the “indications” in cases of furious mania were implicitly believed to point to the strait waistcoat, the unglazed cell, and the iron chain; and the idea of endeavouring to allow varied and constant exercise, and as much personal freedom as possible to those whose leading symptom was impatience of restraint, and a desire for action, was regarded as a delusion no less serious than that for which it was offered as a cure. But Dr. Conolly in England, and Dr. Woodward in America, have effectually settled the question, and shown that for those who desire to break windows, or to chop up

furniture, or to wound their attendants, a few days' work with a pickaxe in road-making, or a spade in gardening, is often an effectual remedy. Mr. George Combe, also, in his work on the United States, gives a good illustration of this method of cure: "A boy who was extremely mischievous, was sent to Dr. Howe as a pupil. He was so full of destructive energy, that he broke the benches, tore the chairs asunder, swung on the doors till he wrenched them off their hinges, and perpetrated all sorts of mischief on frangible objects; while he was so restless that he was incapable of bending his attention to books. Dr. Howe reasoned with him, appealed to his moral sentiments, and did every thing in his power to improve his habits by means of moral suasion, but with little success. He was satisfied that there must be causes for these dispositions, and endeavoured to discover them. He observed that the boy had large lungs, and a high sanguine temperament, which gave him great strength and restless activity; also large organs of destructiveness that prompted him to exert those qualities habitually in injuring the objects around him. He thought of providing him with a legitimate field for the exercise of his dispositions. He sent him into the cellar every morning for three hours together, to saw and split wood for the use of the establishment. This exercise had the desired effect. After undergoing it for some time, he became quite willing to sit still in school and receive

instruction with the other boys; and the benches and chairs were safe. The boy himself was delighted with the change.”* Again, the effect of the silent system, and also of solitary confinement (judiciously applied) in rendering dogged, reserved, and obstinate prisoners docile and communicative is believed to be very great; and it is well known, that the way to cure those who are afflicted with thievish propensities, is not by entirely withholding money from them, but by teaching them a trade by which they may constantly acquire it, and by showing them that this means of acquisition will be endangered by dishonesty. The symptoms of mental excitement produced by ardent spirits are, in like manner, most quickly and effectually overcome by means capable of producing symptoms of an analogous kind. A fright will do this, or any other sudden cause,—and hence Cassio’s immediate recovery from intoxication under Othello’s reproof is strictly in accordance with nature. It is, moreover, from the action of the same principle that the excitement furnished by temperance meetings and discussions forms an important element in preventing a relapse on the part of many reformed drunkards. We all know, too, that solemn conversation is the best relief for the afflicted; that a direct attempt to divert the mind from the master-grief would be futile, and

* Notes on the United States of N. America, by. Geo. Combe.

that buffoonery under such circumstances would be intolerable; we also see, that on a person in a merry mood the most serious tones would fail to make an impression, while at the same moment we might fix his attention by some humorous fable or clever satire. If we saw a person, through over-excited benevolence, scattering alms to every beggar in the streets, and wished to impress him with the folly of his course, we should not succeed by telling him that charity is inconsistent with wisdom, and that men should feel only for themselves; but by pointing out that it is a duty so high as to be worthy of more consideration than such conduct evinces, since in giving these alms he is encouraging impostors and child-stealers, we should be likely to win him immediately to a wiser course. To a person labouring under inordinate self-esteem, a lesson on humility would prove wholly unprofitable; but a remark on the natural dignity of man would at once be listened to and might induce him to treat others with some of that respect he is prone to arrogate for himself; while, finally, in the case of those afflicted with a dread of having incurred the Divine wrath, we know that an assertion to the effect that there is no after-judgment would be unheeded or prove revolting, at the same time that eager and beneficial attention would be given to those who might dwell upon the subject, and who would show that this after-judgment is so certain and so just, that

by all human beings who strive earnestly, however sad their present condition, pardon and happiness may be eventually obtained.

These illustrations might be multiplied to any extent, but the unprejudiced will find in what has been already adduced, enough to generate a belief in the existence of a Homœopathic law; their own experience, when the train of thought is once awakened, will readily supply further illustrations and strengthen their conviction; and when it is borne in mind that we are familiar with no similar instances of safe and specific methods of cure, by Allopathic or Antipathic means, their belief will probably be accompanied with surprise that the doctrine should ever have been resisted.

CHAPTER IV.

OF THE HOMŒOPATHIC THEORY.

IN examining the evidences of the existence of a Homœopathic law, we have accomplished a most important part of our present inquiry; but no sooner do we reach this step than we are impelled to speculate as to the larger pre-existing condition in the chain of causation with which it is connected, and of which it may give a partial manifestation. The question, however, if this further step can be attained, in no way influences the point already reached. The fact, that in order to cure we must employ Homœopathic means, will not become the less a fact because we are unable to give any other answer as to *why* this course must be pursued than the simple one that it has been tried and found to succeed. But as it is known that the higher we ascend, the broader becomes the application of each law, and the more complete our perception of the oneness of purpose with which the world is ruled, it is always pleasing to yield to the impulse that impels us onward, the moment we have the slightest materials to assist us in the effort.

The theory which most readily presents itself in explanation of the Homœopathic law is of a clear and simple kind. It is known that, as far as general observation goes, symptoms of disturbance do not arise spontaneously in the human system, but as a consequence of the invasion of some morbid cause. At the same time it has been ascertained that a large proportion of the symptoms which thus arise are to be regarded as direct efforts of the vital power to destroy or expel the obnoxious agent; and it is a question if this function which can be clearly traced in so many instances is not, in fact, a general characteristic of all the actions of the system which are termed symptoms, and which are manifested in a state of disease. If there be any ground for this supposition, and it seems one that can hardly be resisted, since it would be inconsistent in the absence of proof to that effect, to consider symptoms as sometimes restorative efforts of the organization, and sometimes, morbid causes added to the primary cause,—we shall be led to regard all these actions of the system as friendly attempts to maintain the due development of life, and as serving at the same time by the sense of pain which they awaken to warn us of the seat of the mischief and of the necessity for aid.*

* The term symptoms, as used by medical writers, is intended to comprehend everything which is observed in a patient out of the course of health; and the aggregate of these symptoms is termed the *disease*. According to this view, therefore, the symp-

The idea once arrived at, that the symptoms of disease, so far from being in themselves an evil, are to be regarded as vital efforts to throw off some injurious cause which, unless expelled, must sooner or later stop the working of the delicate machine it has invaded, we immediately recognize that instead of attempting to disturb or overcome them, our sole effort should be to aid the accomplishment of the efforts in which they are engaged. To act, in short, uniformly in harmony with Nature, instead of, as is now the case, acting sometimes in harmony with her, sometimes without regard to her, and sometimes (and by far the most frequently) in direct opposition to her.

There are a vast number of diseases, the progress of which it is impossible to trace without observing, that from the very first moment of the intrusion of the injurious cause, whatever it may be, up to the termination of the disease, either in cure or in

toms and the disease are identical ; but this mode of expression it will be seen has no reference to the *origin* of the symptoms. This is termed the "proximate cause." A good deal of confusion has arisen from this style of language, and the use of the word disease, to express merely the totality of the symptoms, has engendered a constant habit of regarding symptoms as something *in themselves* to be dreaded. If a person, after swallowing poison, were to experience its common effects of vomiting, &c., the poison would constitute the "proximate cause," and the vomiting and other symptoms, the "disease ;" but, as the retention of the poison would be inconsistent with life, it would be to the disease (as the word is used in the above-mentioned sense) that the preservation of the patient would be entirely owing.

death, the whole of the symptoms are clearly to be recognized as so many efforts, increasing in intensity as each previous one may have proved inefficient, till the struggle results in the restoration of health, or till every power of the system is exhausted in the contest and the patient, incapable of further resistance, dies. “The property of healing,” observes a recent anonymous writer in an article on the Medical Power of Nature,* “ought to be described as an ever-acting principle in the system—a principle operating to compensate the regular decay of parts, and acting with increased vigour upon emergencies when any injury is sustained. In this latter respect the healing principle is like a sentinel which is placed on guard over the functions of the body. No sooner does the object of its charge receive damage from an attack, than it flies to the injured part, and sets immediately about effecting a cure. The means which it adopts not only to cure, but to prevent injuries to the person, and expel maladies from the system, may almost be described as something instinct with human reason. Take, for instance, its operations upon a wound or cut. If not prevented by some foul or foreign body placed or remaining in the wound, it commences by a slight inflammation of both sides of the cut; during the progress of this inflammation, a thin liquid substance, of a glutinous nature, exudes to form a species of cement. At first the

* Chambers’s Edinburgh Journal.

liquid is inorganic, but it in time assumes an organized character, with exceedingly minute blood-vessels interwoven throughout, and communicating with the surrounding vessels. In this manner it gradually puts on the appearance of cellular tissue, and at last when skinned over, cannot be distinguished from the surrounding parts, unless by the scar which remains. When nature is disappointed in effecting a cure in this ready manner, or as it is called, by the *first intention*, in consequence of the presence of some foreign body in the wound, it goes on more slowly and on a different plan. It commences by suppurating, or festering, in order to expel the offensive substance; and this being effected, it proceeds to throw up small granulations or protuberances of a fleshy substance, till by this means—by this growing of matter—the wound is filled up and healing accomplished. This is called healing by the *second intention*."

The operation of a similar power may also be noticed if anything too acrid be taken into the mouth. In this case a great flow of mucus and saliva takes place in order to dilute the acrid matter and wash it away. Again, if it reach the stomach, the stomach has a tendency to reject it; and if it be passed through the stomach into the intestines, the intestines immediately act with increased force, and it is thus got rid of. In the case of broken bones, too, symptoms immediately arise, the intention of which is equally clear. The

moment the accident occurs, a liquid is thrown out from around the break in the bone, which turns into a cartilaginous substance and acts the character of a bandage (supposing the bone to have been properly set) to support the junction. The adhesion of the parts takes place gradually by the formation of a bony matter, and the soundness of the limb is restored;—the only danger likely to interfere with such a consummation being that which would arise from an undue exercise of the injured part: a danger which is generally averted by the new and painful symptoms set up the moment the patient attempts to disregard the indications for his complete repose.

Again: “If a muscle, or tendon, or even a nerve is divided, the divided ends are reunited. If a portion of substance, as of the skin and cellular membrane and muscle, is lost, or cut out, the deficiency is repaired, and the cavity built up by granulations from the bottom, and at last covered in by new skin. If a part removed is, without much delay, re-applied—a tooth, the tip of the ear, a finger, a part of the nose,—it becomes firmly united in its original situation.”*

And it is not only in cases of this description, but in cases also where the real cause of the evil is beyond the reach of observation, that the actions of the system in disease may be plainly recognized as healing efforts. In the majority of fevers and acute attacks of various kinds, the over action of

* Dr. Conolly. *Cyclopedia of Practical Medicine*. Art. *Disease*.

the circulation or other disturbance which is manifested, is merely an effort on the part of various organs to perform an increased task thrown upon them, owing to the action of some one or more organs having been suspended or interfered with. It has been estimated, for instance, that the skin has to perform the task of removing from the system about twenty ounces at least of waste matter during each day. Now, when the action of that tegument is checked by cold, a violent effort is made by the circulation to force it to resume its function; and if this effort prove successful, the profuse sweating which is the natural termination of fever carries off the impurities which had accumulated during the suspension of the ordinary exhalations; frequently, however, this means is insufficient, and some of the other organs of excretion are called upon to perform the task of removing the injurious matter. Hence exposure to cold is frequently followed by bowel complaint, catarrh, or inflammation of some internal organ.

“In tracing the connexion between suppressed perspiration and the production of individual diseases,” says Dr. Andrew Combe,* “we shall find that those organs which possess some similarity of function, sympathize most closely with each other. Thus the skin, the bowels, the lungs, the liver, and the kidneys, sympathise readily, because they have all the common office of throwing waste

* Principles of Physiology.

matter out of the system, each in a way peculiar to its own structure; so that if the exhalation from the skin, for example, be stopped by long exposure to cold, the large quantity of waste which it was charged to excrete, and which in itself is hurtful to the system, will most probably be thrown upon one or other of the above-named organs, whose function will consequently become excited; and if any of them, from constitutional or accidental causes, be already weaker than the rest, as often happens, its health will naturally be the first to suffer. In this way the bowels become irritated in one individual, and occasion bowel complaint; while in another it is the lungs which become affected, giving rise to catarrh or common cold, or perhaps even to inflammation. When, on the other hand, all these organs are in a state of vigorous health, a temporary increase of function takes place in them and relieves the system, without leading to any local disorder; and the skin itself speedily resumes its activity, and restores the balance between them."

It will thus be seen that, under favourable circumstances, the *vis medicatrix naturæ* is often sufficient to repel injurious influences. If, however, any organ of the frame be constitutionally weak, it is found unable to accomplish the increased effort demanded of it and to resume its natural state, and it is in these circumstances that the aid of medicine is required, not to suppress the effort and

to throw it upon the other organs, which are already engaged to the utmost in the same direction, but to give, by the application to the feeble organ of its appropriate stimulus, the additional power that is called for. If this be neglected,—if this effort of the organ to perform its due proportion of the task assigned to the system generally be not completed, it is reasonable to infer that the amount of injurious matter unduly retained will, as it accumulates, endeavour to force itself through new channels, and hence that new trains of symptoms will arise, which, if in their turn unsuccessful as the former ones, will be followed by others still more violent, until they finally succeed or the system sinks beneath its last attempt.

The mode in which symptoms thus increase and become more varied and serious in their character, is often strikingly shown. Dr. Combe mentions the following case: “A lady who is in other respects very cleanly in her habits, has never been accustomed to the use of the bath or to general ablution of any kind, and in consequence the skin acts very imperfectly. As a substitute, however, for its exhalation she has all her life been affected with *bowel complaint*, which no treatment directed to the bowels has been able to remove. It is probable that the natural course of the exhalation could not now be restored.” In this instance it is impossible not to infer that any attempt to act against the symptom in question would be attended with danger, and

that if the complaint, in its present form, were stopped in any other way than by restoring the exhalation of the skin, death would ensue, or else some new symptoms would arise. That these symptoms would be of a more aggravated character than those which had been checked, may also be inferred, since we find that nature always endeavours to employ the safest means to carry off any injurious agent, and the more important organs become affected chiefly as her primary efforts fail. In this way we see that malignant diseases, such as schirrus, usually manifest themselves, in the first instance, in parts not necessary to life. They increase only as each preceding effort may prove unsuccessful, and consequently at whatever stage we may observe them, however aggravated their form, we have abundant reason to believe that in acting against them we are only driving nature, in case we succeed, to some new effort more alarming in its character and nearer to her final one.

In this way cessation of itch is said to have been followed by inflammation of the brain—so also the removal of a tumour. Chronic pain of the stomach has been known permanently to cease through a fit of the gout,—and, again, the cessation of gout has been frequently followed by epilepsy or apoplexy.

With regard to the many striking instances of spontaneous efforts of the system to preserve life,

the following is mentioned in the article before quoted, on the medical power of nature. It was a case of complaint in the bowels. "One intestine was projected or drawn so completely into another that there was an effectual stoppage of all communication. The agonizing death which ere long would have ensued to the patient, was fortunately averted by an extraordinary natural provision. The intestine above the point of obstruction formed a junction with that placed below it, and by means of inflammation and ulceration, an opening was formed from the one into the other, through which artificial channel the ordinary motion in the bowels was carried on. Here, then, was performed by nature one of the most astonishing feats of skill with the beneficent intention of saving life!" It is impossible to read this case and to note the effects produced by "inflammation and ulceration," two of the most dreaded symptoms of disease, without recognizing that such symptoms are not set up without a purpose, and that art should only attempt to enable that purpose to be completed. "There is nothing," says Dr. Williams, "in the whole domain of medical science which brings under our view phenomena of greater wonder and perfection than those processes by which, through the agency of inflammation, nature oftentimes averts impending death."

Another dreaded symptom (at least, amongst non-medical persons), and one of the commonest, is

loss of appetite, and it is therefore a frequent error of injudicious friends to oppose this symptom by persuading the patient to take “nourishment,” and by tempting him with delicacies. A very little consideration of the operations of nature and of the beneficial character of symptoms, would soon correct this oftentimes fatal mistake. The loathing of food in disease is nothing more than a loathing of that which would be hurtful. When a morbid influence has penetrated the system, the organs which are called upon to effect its expulsion require a larger amount of circulation than in their ordinary state; and just in proportion to the intensity of their action must be the extent of this supply. Now, under these circumstances, the supply to the organs not employed in the remedial efforts which are going on must be proportionably lessened, because an increase of the circulation in one organ cannot take place without a corresponding diminution in others; and if, therefore, the active efforts of the symptoms are going on in the heart, the brain, the lungs, the kidneys, or elsewhere, we can only suspend these efforts and cause the injurious agent to remain longer in the system by permitting food to the patient—because the moment the stomach is called upon to perform the task of digestion, *it* demands an increased supply of circulation, and one of two conditions must consequently take place. Either the circulation must be withdrawn from the organs engaged in expelling the

cause of the disease, which must thus be suffered to proceed unchecked, or it must, as is usually the case, continue to perform its more urgent duty, and leave the food undigested to add to the torments of the patient, and to warn him, by the disagreeable sensations to which in this state it gives rise, against a repetition of his folly.

The preservative and beneficial consequences of the loathing of food are, indeed, matters of such common experience, that it is surprising it is so rarely recognized in its true light. If, for instance, a person sitting down to dinner with a good appetite suddenly finds himself placed in imminent danger, an immediate action of all his mental powers is required to effect his preservation. The circulation which, at the previous moment, was distributed equally throughout the system, is now called in increased quantity to the brain, and if it be not supplied, the brain will not act as it is required to act in the emergency. But immediately with the necessity for it the supply is given, the cravings of hunger are no longer felt, and if, under such circumstances, food were taken vomiting would follow, and exhibit a further proof of the preservative action of symptoms, by preventing the food, even after it has been swallowed, from entering the stomach when the supply of blood necessary for its digestion could not be afforded that organ. It is impossible to observe the beauty of these arrangements and not to recognize the pro-

priety of acting in harmony with them—and yet we constantly hear of attempts to deaden the irritability of the stomach by the administration of narcotics, and to prevail on the patient to eat, by presenting him with articles devised expressly to overcome his loathing by stimulating his sense of taste.

Even in the progress of the most fatal disease, consumption, the disturbances manifested by the system, from its first stage to its last, may be plainly noted, as the obstinate struggle of the vital power to overcome its insidious adversary. The commencement of consumption is usually traced to some exposure to cold, by which the ordinary exhalations of the cutaneous surfaces have been checked so as to require to be carried off by other organs. When the lungs are weak, owing to accidental circumstances or defective conformation, they are unable to sustain this increased duty, in so far as it falls upon them, and instead of throwing off their proportion of the accumulated impurities, some of these impurities, it may be conceived, become lodged in the organ and gradually accumulate. The first symptoms of cough and of spitting of blood, usually from the bronchial membrane, seem to denote a violent effort to get rid of some offending matter—and that the formation of tubercles when this effort has failed, is only another action of nature to prevent the irritation which the continued presence of that matter would otherwise excite, there

is strong reason to believe. Experiment, indeed, has shown in some instances, that tubercles are formed merely to inclose injurious matter, and to prevent its irritative action; thus Cruveilhier says that, after injecting mercury into the bronchia of a living animal, he found each globule of the metal surrounded by a concrete substance, formed of white granules, in various parts of the lungs. By injecting the mercury into the bronchia, it reached the air-cells; and he afterwards found granules, formed of tubercular substance, around the globules of mercury.* Similar experiments were afterwards performed by Dr. Kay, who introduced, by small incisions, a minute globule of quicksilver into the windpipe of each of five rabbits. This produced at first much coughing; and although the animals continued to take their food well, their breathing was hurried and laborious. The first rabbit was killed eight days afterwards, and in this, clusters of tubercles were found in the lungs, and in the centre of each tubercle a globule of mercury. The others presented granular bodies, tubercles, and more or less of the appearance of inflammation of the lungs. Hence there is reason to believe, that tubercles are absolutely the means of prolonging life by preventing irritation, which would otherwise ensue.†

* Nouvelle Bibliotheque Medicale. Sept., 1826.

† The manner in which nature endeavours to prevent irritation from offending bodies, is constantly shown in a variety of

When it is formed, tubercular deposit, it is well known, may remain for years without injury ; but if a great quantity be deposited, it becomes necessary that they should be got rid of, and nature again commencing her efforts, they then soften down, and the matter escapes. “ When a tubercle softens down, the liquid [of course] has a tendency to escape, like the matter of an abscess. There is formed an abscess which either increases or remains stationary for a time ; and at length when it is discharged, there is an attempt on the part of nature to heal up the part,—to produce cicatrization.”*—“ Laennec says he has frequently seen a cicatrix in the lungs ;—that a cavity had existed and healed ; that the sides had come together ; and the part become solidified and hardened ;—just as is the case with a cicatrix on the surface of the body.”—“ Sometimes, again, people without any cicatrix get rid of this tubercular deposit. When it has occurred only at one spot, an open cavity remains, and the patients live for a long time. It is so common, however,

ways. The poor in Scotland who eat oaten bread, are stated sometimes to have coneretions in the intestines, formed of the beard of the oat—the outside of these coneretions is like velvet. Dr. Christison mentions a case where the efforts of the vital power to eject a morbid agent were singularly exemplified. It is that of a gilder, who, from the character of his business, was injuriously exposed to the action of mercury, and who was attacked with a number of little boils, in each of which was contained a globule of quicksilver.

* Elliotson.

for tubercle after tubercle to take place in the lungs, and go through successive changes, that people generally do not live. It certainly does happen, sometimes, that the lining membrane of these cavities becomes hard, secretes a quantity of mucus, and so remains during the rest of life. No further mischief is done, and the patient is only troubled with cough and expectoration." And even in cases of gangrene of the lungs, violent preservative symptoms are still set up as a last attempt, and inflammation is induced all around the putrid spot in order to discharge it. "Laennec mentions that a gangrenous piece sometimes detaches itself or is detached from the surrounding parts; just like a slough from caustic. The gangrenous part becomes dry and shrivelled like a spot to which caustic has been applied; or it degenerates into a putrid paste like mud. The surrounding structure is inflamed, as in other parts of the body when nature attempts a separation. When a dead part separates from the living by inflammation, the latter ends in ulceration; so that the dead part is left without any connexion with the living. The living part disconnects itself; the dead part becomes isolated, and is afterwards separated. If nature succeed, as she does sometimes, a cavity is often found where the gangrene existed; and this cavity has a lining membrane. Sometimes no cavity is left, but a cicatrix is formed; and the whole appears to have grown up together."

In the majority of diseases the same influence may be clearly traced; in the slightest as well as in others which, like consumption, are most frequently fatal. Thus, in the premonitory symptoms of water of the brain, it is difficult to avoid recognizing a violent effort of the vital power against some injurious cause which threatens its immediate extinction. In the heat of the head, the agonizing pains, the intolerance of light and sound, the convulsions and delirium which occur, a state of the system is denoted inconsistent with the continuance of life; and when, therefore, effusion takes place, we are led to infer that the previous symptoms had arisen from the bloodvessels having received an unwonted accession of watery fluid (owing to the suppression through checked perspiration, or other causes of some of the ordinary functions of the frame), that the preternatural distension felt by the patient has been caused by the attempt of nature to overcome the obstacles to the safe discharge of this fluid, and that the loss of consciousness and death, which must speedily have followed the failure of that attempt, has in this way been averted. After this event, indeed, a patient may live many years; not, however, unless the preservative action of nature be still continued, for as the water accumulates, it is, of course, liable to press generally upon the brain, and thus to cause the brain to shrink and produce idiocy, or to lead rapidly to a fatal termination. But here again some striking symptoms arise—the sutures of the skull

become separated, so as to allow the brain to expand, and this expansion takes place gradually in proportion as the fluid accumulates. The disease mostly occurs in infancy, before absolute cohesion of the bones of the skull has taken place; but cases have been known of individuals in whom the fontanelles had closed, and the bones become well united by sutures, in whom they all separated again. All these symptoms are doubtless very alarming, because they show how great the evil must be which renders it necessary that they should take place, in order to preserve life. But it must not be forgotten that to preserve life is the sole intention with which they are set up, that they would not have been requisite if the first attempts had been sufficiently aided, and that not only do they in all cases effect their object of prolonging existence beyond the period it would otherwise have attained, but that in some cases, even when performing their last and most desperate efforts, they succeed in effecting a thorough cure. With regard to water on the brain, it is asserted that children have actually recovered from the disease at the very last stage. By the ordinary treatment recovery is very rare; but spontaneous cures have been known, and it is admitted that a favourable issue occurs quite as frequently by the efforts of nature as by art. But as a proof that the disease may be recovered from by a child apparently in the most hopeless state, it is said to have been remarked that there is no one symp-

tom which indicates death with certainty, excepting slow breathing.

In apoplexy, again, it is scarcely possible not to regard the symptoms as the efforts of nature to avert immediate death. Extravasation of blood takes place to relieve that fulness of the vessels of the head which, but for such an event, would cause total extinction of life; absorption is then attempted, and finally, if this be accomplished, cicatrization of the cavity formed by the extravasation. If all this fail, paralysis ensues, producing either an immediate and painless death, or enabling life still to be prolonged by confining to one portion of the system the operation of a morbid agency, which must otherwise have been general.

In the efforts of nature to remove pus in suppuration of the liver—in the adhesions which follow inflammation of the pleura—in the adhesions by which, in aneurism, the part is fortified—and in the escape of gall-stones from the liver, or of bile into the blood, when its natural channel is obstructed, we see other instances of preservative power no less striking in their character.

And all these symptoms are constantly quoted by physicians as beautiful illustrations of an ever active principle, at the very same time that they frequently shape their practice not only as if no such principle existed, but as if they recognized something directly in opposition to it. Attempts to “beat down” symptoms, to “stifle,” or to “counter-act” them, are more common than any other.

It is surprising that while the actions of the system are in so many instances regarded as preservative, it should never have been inferred that they are so in all, and that death, instead of being consequent upon their occurrence, takes place only because they can no longer be continued. The circumstance that they are accompanied with pain affords no proof of their being injurious, but directly the reverse, because, if the symptoms which repel an injurious cause, and which remedy its effects, were not co-incident with disagreeable impressions, we should never know from what our ailments originated, or the way in which they might be avoided, or, indeed, of anything being the matter with us until we were removed by death. If, for instance, when a person takes unwholesome food, nature were to perform the task of getting rid of it without, at the same time, inducing nausea and all the other disagreeable consequences of indigestion, there would be nothing to prevent him from indulging in similar food at the very next meal; but by the arrangement which renders pain an accompaniment of the healing effort he is furnished at one and the same time with the remedy and the warning. It will also be seen that but for the pain thus induced, he would have no intimation of the necessity of resorting to the aid which medicine is intended to supply. Some instances have been known in which, owing to a peculiar state of the nervous system, the sense of pain seems

to have been suspended even at the very time that nature was engaged in the most urgent efforts, and which show the evils to which we should be liable if its monitions were withdrawn from us. Sir Gilbert Blane records a case of a man who died of tetanus, and who, instead of experiencing a violent agony from the spasm, had nothing but pleasurable sensations. In this case probably the patient was able, from mechanical signs, to detect that there was something wrong, but apart from that circumstance, he would not, we may suppose, have obtained any advice. There are many instances also of excited and insane persons having, during a suspension of this sense, chopped off their limbs and committed other injuries upon their persons with manifest feelings of satisfaction. A case of paralysis of the sense of touch is detailed by Dr. Yelloly in the *Medico-Chirurgical Transactions* which illustrates, in a striking manner, the nature of the services which pain is intended to perform, and the evils that may arise from an insensibility to it. The patient, after suffering from a cold, lost the sense of touch in his hands up to his wrists, as well as in his feet and half way up the legs. "These parts," says Dr. Yelloly, "are perfectly insensible to any species of injury, as cutting, pinching, scratching, or burning. He accidentally put one of his feet some time ago into boiling water, but was no otherwise aware of the high temperature than by finding the whole surface a complete blister upon

removing it. No species of injury to a vesicated part of either hands or feet is felt by him. His hands are never free from blisters, which he gets by inadvertently putting them too near the fire; and he has met with several severe burns, without being aware of them. His skin, in general, heals very readily after being burnt or scalded in the most severe way." A case has been quoted from the fourth volume of the *American Repository*, where the hands and feet were affected in the same manner. "The man was looking another way and cut his thumb off without knowing it; and when he looked at his hand again it was gone. This man frequently met with accidents from treading on things which he ought to have avoided. He had burns and wounds on his hands and feet."

The portion, therefore, of the symptoms of disease which consists in pain, will be clearly recognized upon a little consideration, as only of a beneficial nature; and as we have seen that in a vast number of cases, that portion which consists in modifications of function and structure is also beneficial, we have the best possible ground to infer that the whole intention of these actions of the system is purely to maintain the integrity of life; that nature, in all cases of invasion, adopts at once the best mode of repulsion and cure; that if defeated in one instance, she turns to other resources still to maintain the struggle, and that she only succumbs when her last energies are exhausted.

If we are to regard the symptoms of disease as, in themselves, morbid, and leading to death rapidly, or otherwise, in proportion to their intensity, it will be hard to understand how it is when they have once arisen they ever, without the interference of medicine, stop short of this termination. There is scarcely a disease of the spontaneous cure of which some instances have not been recorded. Patients have passed through all the symptoms of consumption, paralysis, hydrocephalus, epilepsy, hydrophobia, &c., and at their termination have found themselves in health and safety. It may be said, that all at once the vital principle has asserted its power and subdued the symptoms; but the only proof we have of the existence of this power is actually derived from observing its operation in these very symptoms, or in others analogous to them. We should therefore, if we were to adopt this as an explanation, have to conclude that there are two classes of symptoms observable in diseases, namely, those which are manifestly set up by the vital power, and which are highly beneficial, and those which (although we have no evidence to the contrary) we are not able distinctly to trace as set up by the vital power, and which are exceedingly baneful:—the unfavourable assumption regarding the second class of symptoms being merely founded on the circumstance that we are unable to *prove*, as in the other case, that they operate beneficially. —A conclusion of this kind would be less rational

than if, upon seeing twenty persons actively engaged amongst a number of sick, of whom we could trace a large proportion were administering medicines and doing all in their power to cure, we were to assume that the remainder, of whom we know nothing, but who appeared to be engaged in analogous efforts, were in reality attempting to murder.

It seems, however, as if with regard to symptoms, some such belief as this is really entertained, for while in a majority of cases the employment of art is directed either to oppose or to disturb them, instances are still by no means rare, where the physician recognizes them as efforts which he should aid and imitate. Speaking of gastric inflammation, one of the most severe disorders to which the system is liable, Dr. Craigie says, "Opiates are sometimes useful, but they are by no means free from danger. They may mask and disguise those sensations which are the *best guides* the practitioner can have." And again, with regard to ovarian inflammation, "If, notwithstanding the use of such remedies the symptoms continue little abated, it will be best to wait and trust to the powers of the constitution. If considerable or entire relief do not follow the first attempts to cure the disease, the continuance of them may *interrupt the efforts of nature*." Dr. Parry enumerates among salutary processes, reaction, shiverings, convulsions, bodily exercise, tears, sighing, gout, dyspepsia, fornicatio, ver-

tigo, coruscations, fever, loss of appetite and wasting ; a collection of symptoms which, if taken in a wide sense, might be made to include a large majority of all that have ever been known ; and Dr. Conolly, in alluding to this list, although not admitting its entire correctness observes, that “ illustrations of the salutary effects of the greater number will so readily present themselves to those familiar with pathological phenomena as to require no further observation.” He admits also that many cases of conversion of disease are to be referred to the same head. “ Viewing the principle,” he further adds, “ in its widest extent, it may be said to be first exemplified in the convulsions of infancy ; and it is exhibited for the last time, and ineffectually, in the convulsions so often preceding death.”

A further reason for recognizing symptoms as, in all cases, friendly efforts to be aided instead of being opposed, is found in the circumstance that medicines given directly to counteract them are resisted by the system in a very extraordinary manner. Now we have seen that, whether there be two classes of symptoms, one beneficial and the other injurious, or only one class, and that wholly beneficial, there is a constant watchfulness of the vital power to seize hold of every means to enable it to repel an injurious influence. The contrivances used towards this end appear not only as if they proceeded from a sentient principle, but as if from a sentient principle far higher than any which the

mind in its ordinary state is able to appreciate. Under such circumstances, we are led to consider that instantly upon the administration of a medicine calculated to remove the morbid condition, it would at once be welcomed, if we may use the term, by the vital power, and applied to the utmost use it might be capable of rendering. If, therefore, the symptoms constitute the evil, it is reasonable to infer that a medicine given to act against, or to disturb them, would not be suffered for one moment to lie idle; but we find that medicines administered with this purpose, not only fail to produce as powerful an effect as they would produce on a person in health, but that, in a great number of instances, the system refuses so completely to respond to them, that they may be poured in in almost incredible quantities without producing the slightest effect, or at least without producing any effect until the condition for which they were administered has been removed by other means, and the system has returned to its ordinary state. It is to be apprehended, moreover, that whenever measures of this kind prove successful, and a "cure" is effected by beating down the symptoms, the state of so-called amendment is only continued until the constitutional powers are sufficiently recovered from the check they have thus received to make a new effort of a still more urgent kind; while, in a vast number of cases, there can be no doubt that the contest of medicine against the symptoms is, when the former

proves effective, rapidly terminated by death. The effects to be apprehended from the repulsion of symptoms is generally acknowledged when this repulsion takes place from accidental causes, but attempts towards the very same end are constantly used in medical practice. “ In *Pyl's Memoirs*,” says Dr. Christison, “ there is a case which was attributed to sulphate of zinc having been used as a lotion for a scabby eruption on the head. The subject was a child six years old, and otherwise healthy. The wash, which was a vinous solution, had not been long applied before the child complained of acute burning pain of the head, which was followed by vomiting, purging, convulsions, and death in five hours. Appearances of congestive apoplexy were found within the skull; and the reporter ascribes death to the wash having produced repulsion of the cutaneous disease, and determination of blood to the head.” “ The sensations produced in the irritative state of gastric mucous inflammation,” says Dr. Craigie, “ are often attempted to be relieved, or rather *stifled*, by the use of vinous or spirituous liquors; and occasionally by opium or ether; but the effect of these agents is rather to suspend for a little the communication between the affected organ and the sensorium, than to allay the irritation of the over-excited membrane.” In the treatment of gout the application of cold water or ice, or immersion of the foot in cold water, is known to give relief; “ but the relief,” says Dr. Scudamore, “ is never so certain

as the danger." Finally, the following description by Dr. Elliotson of the struggle of medicine on one side, and symptoms on the other, presenting, in the peculiarly clear and forcible style of the writer, a series of perplexities which would be almost ludicrous if they related to a different subject, will serve as an instructive illustration in the same direction.

"The great indication," he says, "when phthisis is once established, is to *subdue* inflammation if we can. Besides this there is an indication, *on the other hand*, to support the strength by nourishing food and tonics; and a third indication is to subdue irritation by narcotics. It is necessary to attend to another indication;—the removal of urgent symptoms of various kinds."

"We continually find a person sweating so profusely, that his strength is thereby greatly diminished; and this may often be subdued by washing him all over with tepid vinegar and water, &c. We also frequently have to *subdue* another evacuation; which is purging. This, of course, is to be accomplished chiefly by astringents and opium. Unfortunately, the more we subdue one evacuation, the more we increase the other. Frequently, when we check the sweats, the purging becomes more intense; so that while lessening the sweating by tepid ablution (with vinegar and water, for example), it is safe to give astringents, lest diarrhœa should suddenly begin. Diarrhœa is one of the most tiresome symptoms in consumption; and very frequently

astringents and opiates do not succeed in arresting it,—on account of the inflammatory state of the mucous membrane; and yet the patient is too weak to bear leeches, and suffers so much altogether, that it is very painful to apply blisters. Frequently the largest doses of opium (such as will produce great stupor), and the largest quantity of astringents (such as *almost overload the stomach*), have no tendency to check the diarrhœa. For a long time they may succeed; but at last, in most cases, the diarrhœa becomes so severe and obstinate, that they lose their effect. A remarkable large quantity of astringents and opium may be given with little or no benefit. However, we must do our best, and astringents and opium are certainly the best modes of *checking* the diarrhœa.”

This resistance both to Antipathic and to Allopathic medicines (that is to say, to medicines intended either to oppose or to disturb existing symptoms), is worthy of the deepest consideration. It is known that the vital principle possesses a remarkable power of resisting injurious agents, and of causing matter to be poured forth to inclose them, and to prevent them from affecting the general system; and it is also known that, on the other hand, a singular susceptibility prevails towards those agents which are adapted to urgent wants. In the face of these facts, it seems hardly possible to misinterpret the circumstance that medicines, to subdue symptoms, may be often vainly administered, even in the largest doses.

The theory, then, suggested by the foregoing considerations in explanation of the action of Homœopathic remedies, is this: namely—that there is a constant tendency of the system to resist the invasion of injurious causes; that owing to a singular and never-failing watchfulness of the vital powers, the organs employed and the contrivances resorted to to carry on this resistance, are always the most appropriate that can be selected; and that pain, as an accompaniment of these efforts, is to be regarded as a friendly monitor, constantly co-operating with them. That efforts of increasing violence only arise when minor efforts have been found to fail, and when no other means can be available; and that as each new attempt may prove unsuccessful, more complicated attempts will take place till every power of resistance is exhausted;—and, finally, that as nature always selects the safest and most effectual mode of combating morbid agents, and as these modes are manifested by the symptoms of pain and disturbance which she sets up, the task of those who undertake to aid her in the contest should be implicitly to follow her indications, so that when they observe an over-action of any organ, they should exhibit a medicine serving as the appropriate stimulus of that organ, and thus, by enabling it to perform what it is ineffectually labouring to perform, cause the existing evil to be thrown off, and with it all disturbance to which it had given rise.*

* Appendix C. The Theory of Re-action.

CHAPTER V.

OF THE PRACTICE OF HOMŒOPATHY.

HAVING completed our inquiry regarding both the principle and theory of Homœopathy, our next point of interest is to ascertain the progress which has been made in its application. The existence of the law once recognized, it is for those who adopt it as their guide in practice, to discover, by careful observation, the way in which it may most efficiently be applied; but whatever success may attend the efforts made in this direction, it will be clearly seen that the results of such efforts can in no way affect the great principle to which they are subordinate. The law, for instance, which renders a certain amount of heat essential to the maintenance of animal life, would not be the less a law supposing we were unable to determine what the amount of heat should be, and whether it might be best obtained by putting ourselves on the fire, by warming our rooms to the average temperature of the year, by exercise, or by any other means. We should know still that there never was life without heat, even though by our erroneous modes of apply-

ing heat life might sometimes be extinguished. In like manner we might know that disease can never be cured except in obedience to the Homœopathic law, although our ignorance in endeavouring to carry it out might sometimes be productive of evil.

The question, however, of the immediate advantage to be derived from the discovery of the Homœopathic principle must depend so completely upon the amount of knowledge obtained regarding the method in which it should be practically applied, that it becomes highly interesting to examine the nature and extent of the facts already collected on the point.

It appears that when Hahnemann, having become satisfied of the truth of his discovery, first attempted to apply it in practice, he administered such medicines as he thought proper to prescribe, in doses of the usual amount. This was obviously the course natural for him to take, but a little experience soon convinced him that the effects thus produced were too strong; that there was a much greater susceptibility of the system to medicines administered in accordance with the symptoms than in opposition to them, or in disregard of them, and that it would consequently be necessary to lower the dose to an amount which, while it would eventually be followed by a perceptible improvement in the condition of the patient, would produce in its first action no distressing or dangerous results. This

step answered his expectations; and proceeding gradually in his reductions as he found them warranted by experience, he was induced to resort to a mode of attenuating medicinal substances, which finally led him to results of the most surprising kind.

This process of attenuation, which has since been universally adopted in Homœopathic practice, consists as follows: With all mineral substances the process commences with trituration, by which they are reduced to a fine powder. One grain of this powder is put into a small porcelain mortar, with 33 grains of sugar of milk; and after being mixed with a bone spatula, the mixture is pounded for a few minutes (six is the number used by Hahnemann, and, for the sake of uniformity, that number is generally adopted); after which it is detached from the bottom and sides of the mortar, and again pounded for six minutes more; 33 grains of the sugar of milk are then added, and the process is repeated as in the first instance; after which another quantity of 33 grains of sugar of milk is added, and the same course pursued; thus making the attenuation 1.100. In this manner the attenuation is carried to the one-millionth part of a grain; and when a greater attenuation is required, the powders are dissolved in a mixture of alcohol and water. Vegetable juices or extracts are reduced to the state of a concentrated alcoholic tincture, of which one drop is mixed with 99 of alcohol, and then shaken, one drop of the dilution thus effected, is next mixed

with 99 drops of alcohol, and again shaken; and the same process is repeated until the required degree of dilution is obtained. In general the dilution is carried to the decillionth part of a grain.

Now, it is alleged by Hahnemann, and the allegation is confirmed by the testimony of every other physician by whom the Homœopathic principle has been recognized, that medicines attenuated in this way, when administered in harmony with existing symptoms, are not only found effectual to the cure of disease, but that they are more safe and effectual in this form than in any other. It is also alleged, that although the lower dilutions manifest themselves by a more speedy action on the system than the higher ones, their effects are much less permanent and searching, and hence that many cases of deep-seated disease are observed to yield to medicines administered in high dilutions, such as the decillionth part of a grain, towards the removal of which, the low dilutions, such as the hundredth or thousandth part of a grain would be found comparatively powerless.

A matter of this sort would seem to be one simply to be determined by experiment. As observations on the effects of medicines prepared in this way have never been made, or properly recorded, except by the practitioners who testify to the results just mentioned, of course these parties can alone be qualified to speak as to their relative effects. This testimony is of the most satisfactory

kind, and the minute doses are therefore generally employed.

But it must be repeated, that the knowledge of the amount of the dose proper to be administered, can have no bearing on the question of the existence of the Homœopathic principle, any more indeed than the knowledge of the amount of force requisite to project an object to a given point could bear on the question of the existence of the law of gravitation. If an individual after recognizing the Homœopathic law should prefer to discard the experience of those who in practice have extensively applied that law, during a period of many years, and to start from the same point as that from which Hahnemann started when he first made his discovery, such an individual would be just as much a Homœopathist as any one of those who are already enabled by experience to apply it widely to beneficial ends.

It is, however, a singular fact, and one that will some day be looked back upon with amazement, that the denial of the truth of Homœopathy has been founded almost exclusively on the circumstance that Homœopathic practitioners adopt the mode just detailed, of preparing and administering the medicines they employ. It is on this ground entirely that, by a vast number of persons, possessing a reputation for scientific attainments, as well as for an ordinary amount of logical power, the cure of diseases by Homœopathic means has been de-

clared "an impossibility." It is true, that as the cures performed of late years by Homœopathic practitioners are reported to have been produced by means of infinitesimal doses, it would be necessary, supposing we could prove the impossibility of infinitesimal doses having any such effect, to discard these cures from our evidences of Homœopathy; but still, so far from this bringing us to a conclusion of the "impossibility" of the doctrine being true, there would remain abundant evidence to establish a strong presumption in its favour. Hahnemann became a Homœopathist long before he entertained an idea of the efficacy of medicines in infinitesimal doses; and the rejection of a consideration of the facts which led him to promulgate the existence of the Homœopathic law, on the ground that the discovery has since, according to the ideas of some people, been applied in a manner that could not by possibility have yielded any satisfactory result, is a proceeding so utterly unreasonable as to give rise, when we consider the extent to which it has been carried by the leaders of opinion in the medical and scientific world, to feelings of deep humiliation.

Since, however, our evidences of the truth of Homœopathy would be greatly weakened by the withdrawal of that portion which consists in the cures performed by Homœopathic practitioners, it is desirable to inquire what grounds really exist for throwing doubt upon the efficacy of the doses they have employed.

Now it is difficult to conceive the reasons which have induced this doubt. Medicines are given to act upon the various tissues of the human frame, and even the coarsest of these tissues present a delicacy of structure which it is impossible for us more than faintly to appreciate. A little reflection, indeed, will convince us that there must be some portions of our organization, of the fineness of which the human mind would be inadequate to form the slightest conception. It will also appear, that these structures are of far higher importance towards the maintenance of life than the coarser and more outward portions of the frame, and that disease becomes dangerous and severe in proportion to the extent to which they are affected. In the most deep-seated affections, therefore, it is to these tissues that the powers of medicine have to be directed: and when we know that medicinal substances, like all material bodies, are infinitely divisible; that we can never by any process reduce them to atoms so fine but that they might still be infinitely reduced; it seems at once obvious, that if we wish them to reach and to act upon those parts to which I have alluded, and in relation to some of the delicate machinery of which the finest atom to be attained from our very highest attenuations would appear coarse and ponderable, we must endeavour to bring them not only into a finer state than that in which they are ordinarily used, but into a state of exiguity far beyond anything to

which we have been accustomed in dealing with coarser structures. It is simply, in fact, proportioning the delicacy of our agents to the delicacy of the instruments upon which they are to operate.

“From the rapidity and infinite variety of the phenomena of perception,” says Sir Humphrey Davy, “it seems extremely probable that there must be in the brain and nerves matter of a nature far more subtle and refined than anything discovered in them by observation and experiment; and that the immediate connexion between the sentient principle and the body may be established by kinds of ethereal matter which can never be made evident to the senses.” *

That this view is a correct one, few will be disposed to question. “We cannot entertain a doubt,” Sir Humphrey Davy further observes, “but that every change in our sensations and ideas must be accompanied with some corresponding change in the organic matter of the body;” and when it is thus considered that our very thoughts must, in order to their permanence and manifestation in this life, be impressed on our nervous system, and that the recurrence of some specific idea, through, perhaps, a trivial accidental circumstance, after a lapse of forty or fifty years, or the remembrance of a particular spot seen only once during our lives, or of some slight melody, or of a particular odour or taste, must all depend upon certain conditions of

* Consolations in Travel, p. 214.

our material structure caused at the time of the occurrence of the events to which they relate, we see at once how completely we are carried beyond the bounds of our ordinary conceptions, and how ignorant or thoughtless those persons must be who assert, that if coarse agents will not reach and act upon the higher structures of the system, it is "impossible" and "incredible" that finer ones should succeed.

A vast number of curious circumstances are upon record, showing even the minutest ideas of the mind to be connected with certain physical conditions. "A few years ago," says Dr. Mason Good, in his *Study of Medicine*, "a man with brain fever was taken into St. Thomas's Hospital; and as he grew better, spoke to his attendants, but in a language they did not understand. A Welch milk-woman, going by accident into the ward, heard him, answered him, and conversed with him. It was then found that the patient was by birth a Welchman; but had left his native land in his youth, forgotten his native dialect, and used English for the last thirty years. Yet in consequence of this fever, he had now forgotten the English tongue, and suddenly recovered the Welch." Dr. Abercrombie, likewise, quotes the case of a lady, who, when in a state of delirium, spoke a language which nobody about her understood, but which was also discovered to be Welch. None of her friends could form any conception of the manner in which she

had become acquainted with that language; but, after much inquiry, it was discovered, that in her childhood she had a nurse who was a native of a district on the coast of Brittany, the dialect of which is closely analogous to Welch. The lady had at that time learnt a good deal of this dialect; but had entirely forgotten it for many years before this attack of fever.

It is well known that the faculty of absorption is observed to take place with the greatest facility in those tissues which are characterized by a fine and delicate structure and great vascularity; and it is obvious that, according to the minuteness of the medicinal agent must be the facility with which it is received into these parts. So far therefore from there being anything wonderful in the circumstance of the infinitesimal doses of the Homœopathists producing effects such as have never been observed to arise from the administration of medicines in a coarser form, it would be, to those who consider the facts just referred to, and who are accustomed to contemplate "the mysterious and recondite phenomena of organized beings," a legitimate source of surprise if such circumstances were not observable. Some of the vessels of the system must be so small, that a hair in comparison with them would probably present as much difference in relative size as there is between a needle and the mast of a ship; and it is upon structures such as these that medicines are frequently required to act. In the case of the man

in St. Thomas's Hospital, for instance, who during the height of a fever began speaking the Welch language, which he had forgotten for twenty or thirty years, it is evident that the morbid agency was operating powerfully on the delicate parts which had received his first impressions of this language, and which still were fitted, under a certain degree of excitement, to act as instruments of the will in enabling him to utter it. Now supposing it an object to affect these parts by medicine, which mode of administering them would a rational person—even without reference to experience, but merely judging from what he would consider *probable*—be disposed to regard with the most favourable anticipations? Knowing the delicacy of the human system, and the avidity with which nature at once seizes upon all aids to restore it from peril, would he be disposed to feel surprise upon a medicine, known to have a particular relation to the affected organ, and divided into atoms so small as to bear some relation to the delicacy of that organ, being found to produce a palpable effect, while comparatively crude masses of the same substance would produce nothing but disturbance to the coarser structures, which structures would immediately perform an effort to neutralize or expel them? * That an assertion should ever have been

* “When poisons have been taken in a state of *minute division*, it is singular how ineffectual vomiting proves in expelling them from the stomach.”—*Christison*.

made to the effect that it is "incredible" that atoms rendered small by trituration or succussion should have the power of affecting portions of the frame, which larger particles would be unable to reach, is itself almost incredible; and might be so regarded, but for the familiar instances which exist of the mode in which the most obvious inferences, in relation to new doctrines, have ever been received. The man who should assert it to be incredible that a mustard-seed could be made to enter the tube of a thermometer because he had just tried in vain to insert a bullet, would be equally rational with those who reject the infinitesimal dilutions on the ground of the impossibility of their producing any effect.

But that which renders the ridicule bestowed on the infinitesimal doses by so-called scientific persons, still more surprising, is, that even the obvious considerations which have just been presented are not needed to give rise to a supposition of their efficacy, since setting aside any process of abstract reasoning, there is enough in the ordinary phenomena of nature to enable the mere observer of daily occurrences to arrive at a conclusion regarding the "possibility" of these doses proving effective. We all know that a moderate sized pebble may be applied to the surface of the eye without producing any unpleasant effect; while, if the same pebble were reduced to a powder, and one atom of that powder were applied to the same part, the most unendur-

able symptoms would immediately arise. We know too that persons may often be exposed to an atmosphere abounding with coarse dust, and suffer no injury to their health; while there are some trades in which the workmen are exposed to dust of a similar but much finer kind, which almost invariably induce consumption. Particles of steel, again, are known to produce equally injurious effects; and these effects seem to become more serious in proportion to the power which the particles, by reason of their fineness, may possess of insinuating themselves into the organization.

To medical men instances in point must, of course, be abundantly familiar. Theories have even been put forward of most, if not all, diseases being the productions of insects, and as it has been said that nature has provided every animal with other animals to prey upon it, such speculations could not have been met with without suggesting ideas concerning the infinitesimal agencies going on in the system; since, if it can be supposed that diseases such as cancer, &c., may be the production of an insect not yet detected by the microscope, and that this insect may have other beings preying upon it, and these again others, the belief that none but gross and ponderable influences can affect the system must soon become weakened, and the idea that medicines require to be "finely touched" in order to lead to such "fine issues" as the destruction of these agencies, must come to appear a natural, instead of a preposterous one.

The effects, too, of poisonous agents in infinitesimal doses are matter of common experience. A story is related in the London Magazine, of small-pox having been derived from a body which had been thirty years in the grave; and a statement was made by Dr. Jenner, and repeated by Dr. Adams, that a boy attending a grave-digger, while he was re-opening ground in which, ten years before, a person dead of small-pox had been interred, was soon after, in due course, attacked by the disease, which, from every inquiry, he could have derived from no other source.* Nettle-rash, of a very intense description, has been known to have been produced by one tea-spoonful of the water in which muscles had been boiled. A case is on record of a person made asthmatic by the smell of guinea-pigs; and another, where contact with the fur of a hare would produce illness for several days afterwards. There is a curious case, also, mentioned on the authority of Dr. King of Brighton, who dined one day in company with a lady who went into convulsions as soon as her plate was put before her, owing to its containing some peas which had been boiled with mint. She was carried out of the room, and did not entirely recover all the evening. In cases of this sort, of course, there must have been a strong predisposition on the part of the patients; but this does not alter their value as illustrations of the general efficacy of infinitesimal doses, because the

* Adams on Morbid Poisons.

Homœopathists maintain that medicines should, in all cases, be administered in harmony with existing predispositions. Certain odours, as musk, the odour of the rose, various flowers, &c., are, in many asthmatics, followed by distinct fits; and exposure to effluvia or subtle vapours, as those of ipecacuanha, sealing-wax, and other burning substances, frequently produce similar consequences. Dr. Bree mentions the case of a gentleman, who stated that he never slept in the town of Kilkenny without being attacked by asthma; while the late Lord Ormond rarely escaped a fit when he slept in any other place. There is a case equally remarkable, showing the effects of ipecacuanha in this disease, recorded by Dr. Scott, in the *Philosophical Transactions* for 1776. The patient was the wife of an apothecary, and became subject to regular attacks of asthma after her marriage. For some years no particular cause was suspected; but it was at length discovered that the paroxysm invariably came on when ipecacuanha was powdered in the shop. This practice was accordingly discontinued, and she continued well eight or ten years; until one day, when her husband again brought home some powdered ipecacuanha, and opened the packet in order to put the drug into a bottle, "his wife not being far off at the time, and in perfect health." This occasioned a most violent fit of asthma, which lasted eight days, becoming better during the day, and much worse at night.

The effects of malaria, in penetrating the system,

and giving rise, in some instances, to rapidly fatal symptoms, are also well known. Yet no one has ever been able to detect any specific matter of contagion, although many attempts have been made. "It is said that an inveterate ague was produced by the canal at Versailles, though it was little larger than a fish-pond. At Havre de Grace the soldiers were once known to be giddy, and to experience violent headache, five minutes after they had approached the ditches, and then they had violent fever. It is the opinion of Dr. M'Culloch, and also that of several Italian physicians, that a *single inspiration* of malaria may be quite sufficient to cause disease. Lancisi says, that as thirty ladies and gentlemen were making an excursion of pleasure up the Tiber, the wind suddenly shifted to the south, coming over the Pontine Marshes; and twenty-nine were *instantly* taken ill, only one escaping." Indeed, so subtle is its influence, that, in the case of vessels lying off an unhealthy shore, the difference of half a cable's length from the coast has caused vessels to suffer or escape. "Dr. M'Culloch mentions that malaria easily unites with fogs and clouds; and concludes, that as far as these will go, so far may the malaria extend. He has found records in ships' books of malaria having produced fever at a distance of five or six miles or more from the shore. He says, also, that it is well known that points on the coasts of Suffolk and Norfolk and the eastern coast of Scotland have ague, though there is no

local source of malaria for many miles; and that there are some points where there is no source of malaria for even a greater distance than that; and therefore he contends, that it must be brought from Holland and the northern shores of the Continent.” *

If it is strange in these days, when the wondrous world of a single drop of water has been made familiar to the common eye by the improvements in the microscope, and when the daguerreotype presents us with pictures instantaneously painted by the invisible hand of nature, that even the vulgar should fall into the absurdity of supposing the greatness of results necessarily to be in proportion to the coarseness of the instrument; how much more must it excite our surprise, that professional persons, who are not only familiar with the action of infinitesimal agents, but who are called upon day by day to consider the operation of such agents and to apply a treatment in relation to them, should with still greater vehemence commit themselves to such a view.

And not merely is the doctrine of the operation of minute atoms of medicine on the human frame supported by accidental analogies, but it is abundantly demonstrated by the results of experiments performed by medical and chemical philosophers, irrespective of Homœopathic practice. Metallic medicines, for instance, are known to be inert, unless oxidated; so that, although death may be

* Elliotson.

produced from the smallest quantities of the oxides of mercury, copper, &c., they may otherwise be taken in large quantities without any deleterious effect. Many persons have swallowed copper coins, and retained them for weeks, without having any symptom of poisoning with copper; and large quantities of fluid mercury have also been repeatedly swallowed, and proved harmless. Now there is reason to believe that this development of power by oxidation must arise in great measure, if not entirely, from the action of the oxygen in overcoming the cohesion of the original mass, and thus rendering practicable its absorption into the system; and supposing this to be the case, it would present us at once with a beautiful illustration of the consequences of minute division. But there are yet further instances which bear upon the point. The effects of mercury are exemplified to a remarkable degree when it is inhaled in the form of vapour. "Corrosive sublimate," says Dr. Christison, "when incautiously sublimed in chemical experiments, has been often known to cause serious effects;" and a case of salivation and gangrene of the mouth ending fatally is recorded of a chimney-sweeper, after cleaning a gilder's chimney, during which operation he felt a disagreeable sense of tightness in the throat. Dr. Coldstream, of Leith, informed Dr. Christison, that while subliming about twenty-four grains of corrosive sublimate with the blowpipe, when a student, he and

several of his fellow-apprentices were seized with painful constriction of the throat ; several had headache, and one had sickness and vomiting.

And even the mere vapours arising from metallic mercury at the ordinary temperature of the atmosphere, have been found to produce the worst species of mercurialism. “One of the most striking examples known of the baneful effects of mercury thus gradually insinuated into the system occurred in the well-known accident which befell his Majesty’s ships *Triumph* and *Phipps*. These vessels were carrying home, in 1810, a large quantity of quicksilver, saved from the wreck of a ship near Cadiz, when, by some accident, several of the bags were burst, and the mercury spilled. On the voyage home the whole crews of both vessels were more or less severely salivated; two died, many were dangerously ill,—all the copper articles on board became amalgamated,—all the rats, mice, cockroaches and other insects, as well as a canary-bird, and several fowls, and all the larger animals, such as cats, dogs, goats, and sheep, were destroyed.” Results equally serious have been caused by the fumes of other metallic substances. There is a story told of Paracelsus, to the effect that, being one day put out of temper by an acquaintance, he made him hold his nose over an alembic in which arsenic was subliming; and that the object of this severe joke nearly lost his life in consequence. “An apothecary of Colberg, while subliming arsenic, had not

been careful enough to avoid the fumes; and was soon after seized with frequent fainting, tightness in the præcordia, difficult breathing, inextinguishable thirst, parched throat, great restlessness, watching, and pains in the feet. He had afterwards profuse daily perspiration, and palsy of the legs; and several months elapsed before he got entirely well." Gehlen, the celebrated German chemist, died from accidentally inhaling a small portion of arseniuretted hydrogen; and in consequence of this accident, few chemists venture to prepare it. Gold, which in the state of hydrochlorate produces distressing effects even in doses so small as the tenth of a grain, gives rise in the fulminating state to symptoms still more serious. Lead, also, in vapour, is more dangerous than in any other form.

With regard to other medicines, the process of developing their power is effected by dissolving them. "Poisons," Dr. Christison further observes, "act the more energetically the more minutely they are divided, and hence most energetically when in solution. Some which are very energetic in their fluid state, hardly act at all when undissolved. Morphia, the alkaloid of opium, may be given in powder to a dog without injury in a dose which if dissolved in oil or alcohol would soon kill several. Previously dissolving poisons favours their action in two ways,—by diffusing them quickly over a large surface, and by fitting them for entering the bibulous vessels."

It will perhaps be observed, as regards the dilution of medicines, that it is customary under the present practice, to administer in this way such as are soluble. But it must be noticed, that the aggregation of the particles in the mixtures ordinarily prescribed is, comparatively, but slightly reduced, in consequence of the large amount of medicine proportioned to the water or other material through which it is distributed. If, for instance, a powder were reduced to a paste, the cohesion of its particles would only very partially be overcome; if it were reduced to a thick liquid, the cohesion, although much further reduced, would still be very considerable, and further reductions might therefore be carried on with the certainty of rendering the aggregation of the medicinal substance much less perfect, and of thus reducing its atoms to a minuteness in which they might be alone capable of penetrating the finer tissues of the body. The operation of these circumstances has in fact been distinctly observed. "A small dose of *concentrated* oxalic acid," says Dr. Christison, quoting from the *Edinburgh Medical and Surgical Journal*, "acts feebly as an irritant or corrosive; moderately diluted, it quickly enters the blood and causes speedy death."

From the foregoing remarks, the blindness of those who fall into the absurdity of ridiculing the exhibition of medicine in infinitesimal doses, will be sufficiently seen. A little reflection will show, that

if ever ridicule might legitimately be resorted to in the discussion of a scientific subject, nothing could be found more calculated to provoke it than the manner in which medicinal mixtures of all kinds have hitherto been poured into the system ; and that by the light derived from the facts now ascertained regarding the action of minute doses, many circumstances in connexion with the qualities of remedial agents may for the first time be explained. The repulsive odour and taste which have hitherto warned us in vain, will now be received in their true meaning.* The reason why many agents of supposed value have hitherto remained useless, will also be understood, and we shall no longer have to deplore that the curative powers of such medicines as digitalis, hydrocyanic acid, phosphorus, arsenic, &c. must rest for the most part undeveloped, or be sought only at the greatest risk, owing to the danger of administering them in crude preparations. “ Regarding the use of digitalis in inflammatory diseases,” says Dr. Elliotson, “ I know some say they can cure inflammatory affections

* “ Even a small quantity of corrosive sublimate, either in the solid or fluid state, and considerably diluted, has so strong and so horrible a taste, that I should think no one could swallow it in a form capable of causing much irritation in the stomach, without being at once made sensible by the taste that he had taken something unusual and injurious. People have, in fact, been occasionally thus warned of their danger while in the act of swallowing the poison, and have consequently stopped in time to prevent fatal consequences.”—*Christison on Poisons*.

with it, unaided by venesection ; — but I have really a horror of digitalis. I have seen *so many people die suddenly under its use*, that whether they died from it or not, it is a medicine of which I am particularly shy.” A grain and a half of phosphorus has been known to prove fatal, and owing to the uncertainty and occasional severity of its operation, this medicine has been expelled from most modern pharmacopœias. Two-thirds of a grain of hydrochlorate of palladium, when introduced through a vein, will kill dogs in a minute ; and a single drop of hydrocyanic acid will instantly produce the same effect. Even the medicines in more ordinary use are liable, under certain circumstances, as they are now administered, to lead to results instantaneously fatal. A case is on record, of an infant three days old, being killed in twenty-four hours by two drops and a half of laudanum.

Before concluding the present remarks on the practice of Homœopathy, it is necessary to point out two additional novelties which characterize that practice, and which strike the reason not only as obvious improvements in the modes of applying medicines, but as absolutely essential to be adopted in all medical treatment, professing to proceed on a scientific plan. The first of these is that Homœopathic practitioners never administer more than one medicine at a time ; and the second, that, in most cases, each medicine is given to be dissolved upon the

tongue instead of being taken into the stomach. It will be obvious, that when medicines are administered in mixtures, it must always be impossible to ascertain how much of the effects which follow are to be attributed to one ingredient, or how much to another; and also to feel certain that, like a number of sounds mingled together without a knowledge of their proper relation, they will not produce intolerable discord where harmony should alone be aimed at. Perhaps it is not too much to say, that of all the causes which have encumbered medicine with "contradictory facts and loose speculations," and which have prevented its advance, as compared with other sciences, this has been the most serious. When success, or apparent success has in any case been achieved, the practitioner has been rendered little wiser than before; and it is therefore common to meet in medical books with instances where the lamentable influence of these circumstances in retarding knowledge is fully admitted and lamented. Dr. Craigie, writing on catarrhal consumption, a disease, "on the proper mode of managing which, professional opinion has varied much," and regarding which, therefore, every clear fact is of the highest importance, thus writes: "One decided case of recovery under the use of the caustic issue I saw effected; but it must be mentioned that it was employed after blood-letting, and along with various other adjuvants"—so that we are still in the dark, whether the caustic issue, the blood-letting, or some

one of the various other adjuvants is to be regarded as the healing agent. Dr. Elliotson again, speaking of anæmia, or want of blood, a disease which occurred some years since in a peculiarly marked form, amongst some workmen in the gallery of a coal-pit, near Valenciennes, remarks, "Mercury was first given, and did the patients a great deal of harm. Subsequently, great advantage was gained by the exhibition of iron. I must mention that Dr. Combe, in the treatment of a similar case, used both the sulphate and the carbonate of iron; but he does not mention the doses, or the length of time they were given. Mercury, which appeared to be injurious in France, was also exhibited, *as well as a number of other drugs; so that the iron did not appear to have a fair chance.*" The same writer, subsequently treating of a disease of the skin, termed "ichthyosis," fully recognizes the only scientific way in which medicines can be tested, but it is remarkable that it has been left entirely to Homœopathic practitioners to enforce its general adoption. "In this disease," he remarks, "pitch made into pills is said to do good. At the same time that I employed this treatment I had the patient rubbed over with olive-oil. In this way he got well. Of course, I was quite in uncertainty as to whether it was the internal or the external medicine that did him good; and being told that he had a brother in a similar state, I requested that he also might come and be cured. I gave him pitch only, but he was

no better for it. I then left it off and had him oiled, and this answered completely.”

With regard to the practice of pouring medicines into the stomach, an organ whose office it is to receive alimentary substances, and which usually makes every effort to eject all other articles, little need be said. The manner in which medicinal agents enter the system in the form of vapour and other ways, as well as the action of malaria and the contagious properties of disease, confirm the supposition which naturally arises from a knowledge of the functions of the stomach, namely, that as a general rule it is not through this organ that medicines can act most powerfully and beneficially.

The facts and considerations brought forward in this chapter lead to the conclusion that the mode of practice adopted by the Homœopathists is consistent in all its parts with reason and experience, and that the ordinary mode must necessarily be attended with a high degree of uncertainty and danger. But apart from the conviction which we thus arrive at, by a reference to reason and facts, there is an indirect testimony to the advantages of the infinitesimal doses, of a very striking kind. Almost from the earliest struggles of the Homœopathic practitioners, down to the present time, the outcry they have had to meet has been for the most part exclusively directed against these doses, — and not in reality against the system of Homœopathy, the discussion

of which has, as far as possible, been adroitly merged in the question of the doses, with which intrinsically it has nothing to do. Now the success which has attended this mode of presenting the subject, not only to gross-minded and ignorant people, but to those from whom more reflection might be looked for, has been fully shown. On all hands, it is the use of the small doses which excites a disinclination to examine the system, and enlists Imagination (the most active foe of science), to aid the opposition; for no one can “imagine,” after the world has been accustomed for centuries to believe quantity to be the grand consideration in medicine, that such doses can have any effect. It is therefore obvious that the Homœopathists, from the time of their very first movement, must have seen that their great stumbling-block would lie in this direction; and it is consequently pretty evident that nothing could have induced them to persist in their peculiar mode of practice but that sort of conviction which, being founded on a daily and hourly cognizance of facts, is no more to be laughed down than is the fact of our existence. It may be said that the mode was adopted as necessary to attract attention, but surely the doctrine of Homœopathy itself was sufficiently startling to do this; and moreover, when it was found that, instead of attracting attention, it met with nothing but ridicule, and actually deterred people from giving attention to the doctrine with which it was allied, nothing but conviction could

have supported its promulgators in their obstinate adherence to it. Perhaps, however, it will be urged that, although it was palpably calculated to excite ridicule and to prevent attention from being given to Homœopathy itself, yet, as Homœopathy is an error, it is necessary for those who practise it, in order that they may not produce serious results, to give medicines that shall lead to no result whatever. But this again would be fallacious, because the great amount of ridicule has been directed against the high dilutions, and it would have been perfectly consistent with all ordinary ideas of safe practice for the Homœopathists to have limited their doses to the twentieth or tenth part of a grain, (and in cases such as syphilis, ague, &c., which are at present treated Homœopathically by the old practitioners, even this limitation would not have been necessary,) and entirely to have given up their doctrine about quadrillionths and decillionths.

We thus gain, indirectly, a testimony in favour of the infinitesimal doses, which of itself is sufficient to induce an impression of their efficacy in the minds of all by whom it shall be calmly weighed. To believe that the entire band of Homœopathic practitioners who are now labouring in every part of the civilized world, and who all hold legal diplomas (a large proportion of them from the first colleges in existence), can be thus perfectly united in propagating a fraud or delusion, not only of a motiveless kind, but absolutely injurious to their interests, must require in-

deed an enormous stock even of that kind of credulity which is more complete than any other, and which, as it is entirely peculiar to the minds of those who distinguish themselves by their opposition to new truths, has been aptly termed “the credulity of unbelief.”

CHAPTER VI.

ON THE OPPOSITION TO HOMŒOPATHY.

IT is known that, from the time of its first enunciation to the present day, the doctrine of the existence of a Homœopathic law has been generally received with anger and derision; and those who have given attention to the preceding chapters will now, perhaps, feel disposed to ask, “Can it be simply by maintaining the principle and practice thus stated, that the Homœopathic practitioners have drawn upon themselves the unmitigated opposition of their professional colleagues?—and has there not, at all events, been some strong argument brought forward to justify this opposition which remains yet to be noticed?” I can only answer that I am not aware of any such argument having at any time been attempted.

But it may probably be suggested that, although a clear refutation of the Homœopathic doctrines may never have been put forward, it is to be inferred that the majority of the medical profession must have seen plainly that such refutation is by no means difficult before they would have ventured to

vituperate its advocates, or to refuse to test their allegations:—that, in fact, it is out of the question to suppose that a large body of enlightened men engaged in the pursuit of a liberal profession, would almost unanimously reject a doctrine, of the truth of which they have been specially qualified, by education and habit, to form a judgment, unless they could distinctly detect that some gross error lies beneath it.

That these assumptions will not hold good, may, however, be explicitly shown. There is quite enough upon record regarding the treatment which former discoverers in medicine have received at the hands of the profession to render it plain, not only that such opposition as that which is now directed against Homœopathy may be carried on from the merest prejudice, but that the profession are unfortunately prone to such proceedings, and that these are, consequently, just what the promulgators of any new truth must in the first instance prepare to encounter.

It has been objected by the opponents of Homœopathy, as well as by the opponents of other new doctrines at present attracting the attention of the world, that they are quite sick of hearing the names of Galileo, Harvey, Jenner, &c., constantly cited, since it is in the power of every impostor the moment he is discredited to find in their fate a parallel to his own. But although the fact that these discoverers were ridiculed and persecuted

does not prove that every one who is treated in the same way must necessarily be as honest and great as they were, it must nevertheless always be remembered, that it forms an unanswerable reply to those who bring forward the opposition even of the entire body of the medical profession, as an argument of the slightest weight against any new doctrine whatever. At the same time, also, it does really furnish an indirect testimony in favour of the doctrine against which it is levelled ; because there is hardly any exception in the history of discoveries where such opposition has not been experienced ; and it is natural to expect, that each new truth will meet with the same reception that has been accorded to its kindred. We know that a vast number of new follies in medicine have not only escaped persecution, but have been well thought of, or, at all events, tolerated until they died a natural death ; but we do not know that new and momentous truths have at any time met with similar indulgence.

It is both right and desirable, therefore, for the advocates of Homœopathy, so long as it is sought to bring the condemnation of the majority of the profession as an argument against it, constantly to remind the public, that this condemnation, if of any weight at all, is of weight only in favour of the system ; that it is no reproach to any men to have the same hostility directed against them as that which caused Harvey to be regarded as a “quack,” and

Sydenham as a "murderer," or that made Jenner "the mark for all to hit at;" that caused the books of Aristotle to be burnt, and also those of Descartes; that represented Linnæus and Buffon as putting forward impieties likely to ruin religion and morality; that caused Ambrose Pare to be hooted at for introducing the ligature in cases of amputation, as a substitute for boiling pitch; that represented those who prescribed quinine as "unfit to practise;" and, finally, that drove Dr. Gall, as it drove Hahnemann, from his country, to seek elsewhere toleration and hospitality.

It must be remembered, too, that in each of these cases the hostility which rose up was believed at the time of its fury, as it is now believed in the case of Homœopathy, to be perfectly justifiable, and, consequently, quite different in character from that which had been directed against preceding truths; so that the applicability of the lesson furnished by the humiliating results of previous intolerance has invariably been denied by those who have had most need to keep it in their thoughts. It is also to be remarked, that in some of these instances the reasons upon which the hostility was professedly founded were much stronger than in others; the "conclusive arguments" which were to "consign to oblivion" each "temporary imposture" being really calculated, in some instances, to raise perplexity (although, of course, in no case to justify abuse); and that, in the case of Homœopathy, fewer

attempts have been made at direct argument than in any other, owing doubtless to the feeling, that ridicule against the infinitesimal doses might be safely relied upon as sufficient to put it down. We see therefore, that while, in all the cases above alluded to, ridicule, abuse, and persecution were coupled more or less with appeals to the judgment, they have in this been used almost alone, and are, consequently, to be estimated as more lowering than they would otherwise have proved to the reputation of those who have had recourse to them.

But it will be said, that books and treatises have been written against Homœopathy, and that these surely must contain something to justify the opinions of their writers. On this point it will be desirable for the reader to refer for himself to the works in question, to satisfy any curiosity he may entertain; and, with that view, I would particularly direct attention to the chief of them; namely, *Animal Magnetism and Homœopathy*, Second edition, by Mr. Edwin Lee; *Homœopathy Unmasked*, by Alexander Wood, M.D., Fellow of the Royal College of Physicians, Edinburgh; and the chapter on Homœopathy in Dr. Dickson's *Fallacies of the Faculty*; as affording very remarkable specimens of the style of diction and modes of reasoning to which, up to the present time, the opponents of the system have confined themselves. The most insignificant facts, the idlest gossip, the smallest discrepancies, are all laid hold of, and magnified

and applied with a degree of eager credulity for which it would be difficult to find a parallel, and which, at the same time, would render it frivolous to devote any lengthened attention to the inferences of the writers. There is, however, one very curious and concise way of showing the nature of the works, and the value of their statements; since in those instances where they respectively touch upon the same pieces of gossip, they for the most part directly contradict each other's "facts." Thus Dr. Wood, with the flourish, "Alas, poor Malibran!" insinuates that that lady was killed by the Homœopathists; while Dr. Dixon says, in describing the cause of her death, "Just as she had taxed the powers of her too delicate frame to the uttermost—at the very moment she was about to be rewarded by a simultaneous burst of acclamation, she fainted and fell—fell from very weakness. Instantly a medical man leapt upon the stage—to administer a cordial? No—to bleed her!—to bleed a weak, worn, and exhausted woman! And the result?—She never rallied from that unfortunate hour." Again: Dr. Wood says, "The pellets of the Homœopathists do not always contain the small doses which their vendors profess. The Duke of Caniz-zaro was poisoned by a Homœopathic dose of arsenic!" while an anonymous writer against Homœopathy, who appears to derive all he knows of the system from Mr. Edwin Lee, speaking of the same occurrence, describes it in a very different way:

“The fate of the late Duke de Canizzaro, with whom I was acquainted may also serve as a warning for those who are disposed to tamper with their healths. The Duke received three pills, which he neglected to take at the prescribed intervals, *and believing them to be Homœopathic*, thought that no harm could result from taking them *all at once*—and he did not survive more than two or three hours.” Neither of the writers mention the amount of the dose, the name of the practitioner by whom it was prescribed, or any particulars that can render the story of the slightest value as a matter of fact ; while both tell it in a different way. Both also seem unable to perceive, that if the dose was a Homœopathic dose (which, of course, it was not), all the rest of their argument, to the effect that these doses are too small to produce any possible result, must fall to the ground ; while, on the other hand, if it was not a Homœopathic dose, it only shows the ignorance or dishonesty of the physician, the folly of the patient, and the danger of large doses in general,—the latter being one of the very points which Homœopathic practitioners seek most earnestly to enforce.

Passing, however, from writers of this class, it is proper to notice one of a different order, whose observations bring into a very simple form *all the objections* which the best-informed opponents of the system profess themselves able to bring against it.

“The *principal facts* to be urged against the

Homœopathic doctrine," says Dr. Pereira,* " may be reduced to four heads," and as these are very concisely stated, it will be well to examine them in detail.

The first head is as follows :—

" 1. Some of our best and most certain remedies cannot be regarded as Homœopathic: thus sulphur is incapable of producing scabies, though Hahnemann asserts it produces an eruption analogous to it. Andral took quina in the requisite quantity, but without acquiring intermittent fever; yet no person can doubt the fact of the great benefit frequently derived from the employment of this agent in ague. Acids and vegetable diet cure scurvy, but I never heard of these means causing a disease analogous to it."

Now with regard to the assertion that sulphur is incapable of producing scabies, it is merely to be observed that, as this medicine is known to cure scabies, the Homœopathic doctrine only requires that it should produce symptoms analogous to those of that disorder—and this Dr. Pereira does not deny. In fact, in a subsequent part of his work, he makes his readers aware that very little is known of the pathogenetic action of sulphur upon man; but so far as his information goes, it tends decidedly to confirm the views of the Homœopathists.

* Elements of Materia Medica.

“ In small and repeated doses,” he says, “ sulphur acts as a gentle stimulant to the secreting organs, *especially to the skin* and the mucous membranes, particularly the bronchial membrane. It promotes the capillary circulation of these parts, and increases their secretions.”* With regard to the next fact, namely, that Andral took quina without acquiring intermittent fever, from which Dr. Pereira infers that the statement of the Homœopathists, that quina (which cures that disorder) possesses the power of exciting symptoms analogous to it, is erroneous, it will be sufficient to quote the testimony of another opponent of Homœopathy, whose evidence on a matter of fact is just as valuable as that of M. Andral. “ The *most perfect ague fit* within my own remembrance,” writes Dr. Dickson, “ appeared to me to be the effect of two grains of quinine, which I prescribed for an asthmatic patient!” Finally, with regard to the remark that “ acids and vegetable diet cure scurvy,” but that Dr. Pereira “ never heard of these means causing a disease analogous to it,” it is only necessary to point out that the circumstance of a person, however eminent, having “ never heard” of any particular fact, would never be received by those accustomed to require strict evi-

* The chief symptoms which this medicine is capable of producing, as well as those of upwards of two hundred other medicines, have been ascertained with remarkable precision by the experiments and researches of Hahnemann and his disciples. They will be found detailed in Jahr's *Manual of Homœopathic Medicine*.

dence, as proof against the existence of such fact—a caution, the necessity for which will be well shown in the present instance, by extracting the following passage from a work, quoted by Dr. Black of Edinburgh, entitled *Observations on the Healthy and Diseased Properties of the Blood*, by W. Stevens, M.D., p. 451 :—“ During a residence of twenty years in the West Indies, I have only seen one case of scurvy, and that case was decidedly brought on by the excessive use of citric acid, which an American gentleman had been recommended to use as a preventive of yellow fever. His own conviction, as well as mine, was, that the scorbutic symptoms had been brought on by the acid.”

The objections of Dr. Pereira, under the next head, are as follows :—

“ 2. In many cases Homœopathic remedies would only increase the original disease ; and we can readily imagine the ill effects which would arise from the exhibition of acrids in gastritis ; or of cantharides in inflammation of the bladder ; or of mercury in spontaneous salivation.”

It will here again be seen that Dr. Pereira relies upon a loose mode of reasoning, which cannot be admitted in discussing any matter of fact. In the first place, he *assumes* that medicines, acting in harmony with existing symptoms, “ would only increase the original disease,” while he must be thoroughly

aware, from the number of admitted facts to the contrary, that this is by no means a necessary consequence. "Mercury produces dropsy," says Dr. Craigie, "but that is *no argument* that it may not cure it;" but if Dr. Pereira's assumption, that such a medicine would "only increase the original disease," is worth anything, it must be a very strong argument against its curing it. Dr. Pereira then says, "We can readily *imagine* the ill effects which would arise from the exhibition of acrids in gastritis; or of cantharides in inflammation of the bladder; or of mercury in spontaneous salivation," but it need hardly be remarked, that even the most ready efforts of the imagination are of little value in matters of this sort. This will be best shown in the present instance by comparing Dr. Pereira's imaginary view of the effect of acrids in gastritis, for instance, with that which is really recognized in medical *experience*. "In some conditions of acute gastritis," Dr. Elliotson observes in his *Principles and Practice of Medicine*, "the most powerful medicines *are those of an acrid kind*. Sulphate of copper is one of the best; and next to that sulphate of zinc. These operate immediately, and produce little nausea."

Dr. Pereira's objections, under the third head, are thus stated:—

"3. The doses in which these agents are exhibited are so exceedingly small, that it is difficult to believe they can produce any effect on the system,

and therefore we may infer that the supposed Homœopathic cures are referable to a natural and spontaneous cure, aided in many cases by a strict attention to diet and regimen. What effect can be expected from one or two decillionth parts of a drop of laudanum? Hahnemann says, it is foolish to doubt the possibility of that which really occurs; and adds, that the sceptics do not consider the rubbing and shaking bestowed upon the Homœopathic preparation, by which it acquires a wonderful development of power,"

In the above objections, Dr. Pereira once more trusts to conjecture in preference to experience. He says that the doses are so small, that "it is *difficult* to believe they can produce any effect on the system, and *therefore we may infer* that the supposed Homœopathic cures are referable to nature;" but it by no means follows that this inference will prove correct. There are many things which are difficult to believe, but which, nevertheless, we are compelled to admit; so that if it were really, as he alleges, difficult to believe that to operate successfully on an organization, of the delicacy of which it is impossible for the human mind to form the remotest estimate, we must employ agents so delicate as to be likewise beyond all our ordinary conceptions, the fact of this difficulty existing would have very little weight in the face of daily experience. It is "difficult" to believe that, by arranging the vi-

brations of sound in a particular manner, two loud sounds may be made to produce silence; and also, that owing to an analogous property of light, two strong lights may be made to produce darkness. It is “difficult” to believe that the most sensitive lady might plunge her uncovered hand into a caldron of boiling tar without receiving the slightest injury; while, if her hand were covered with a glove, it would be dreadfully burnt.* It is “difficult” to believe that the white light from the sun is composed of all the primary colours;†—that the principal sup-

* “Tar boils at a temperature of 220°, even higher than that of water. Mr. Davenport informs us that he saw one of the workmen in the King’s Dock-Yard at Chatham immerse his naked hand in tar of that temperature. He drew up his coat-sleeves, dipped in his hand and wrist, bringing out fluid tar, and pouring it off from his hand as from a ladle. The tar remained in complete contact with his skin, and he wiped it off with tow. Convinced that there was no deception in this experiment, Mr. Davenport immersed the entire length of his forefinger in the boiling caldron, and moved it about a short time before the heat became inconvenient. The workmen informed Mr. Davenport, that if a person put his hand into the caldron with his glove on, he would be dreadfully burnt; but this extraordinary result was not put to the test of observation.”—*Brewster’s Letters on Natural Magic*.

† “The composition of light affords a subject for astonishment and admiration. The discovery by Sir Isaac Newton that the white light from the sun is composed of all the primary colours, and that when all those colours are united they become colourless, seems so entirely opposed to all our ideas of what is probable, that it might completely stagger belief, were it not established by the clearest demonstrative evidence. The decomposition of light by most visible substances, the absorption of some of the coloured rays, and the reflection of others, by which means the

porter of life and combustion is a gas which constitutes part of our atmosphere, and is not cognisable by our senses;—that when iron filings are strewed on a board and a magnet is held underneath, they are immediately attracted, and this to the same extent as if the interposing substance were not there,—that owing to the attraction of a particular metal to oxygen, the extraordinary phenomenon may be presented of ice on fire; since potassium, when placed upon frozen water, will even abstract oxygen from it in that state;—that if the temperature of water be increased beyond the boiling point, the insensible vapour will exert an expansive power sufficiently great to tear asunder the strongest vessels in which it may be confined;—and finally, it is “difficult” to believe almost all things that are hourly presented to us; and, above all, the fact of our own existence. Still we should hardly consider that “we might therefore infer” that we are wrong in connecting these events with the causes which experience has shown to be capable of producing them. That in the case of Homœopathy,

different colours of bodies are produced, are also phenomena connected with light, the operations of which are entirely unknown. Recent discoveries relative to what are termed the “interference,” the “diffraction,” and the “polarization” of light, have disclosed new and interesting properties in this subtile fluid that were previously unsuspected; and the extension of our knowledge *seems only to render our incapacity to comprehend the nature of that subtile agent the more apparent.*—*Bakewell's Natural Evidence of a Future Life.*

the experience which connects the cures performed with the administration of infinitesimal doses is very striking and extensive, is certified, as we have seen, by the Editors of the Medical Cyclopædia,* and we therefore must not permit a “difficulty” such as that which is present to Dr. Pereira’s mind, to have a weight in this case, which we would not allow to it in others. If mankind had always adopted his view of suffering “difficulty” of belief to deter them from the task of accumulating facts, and from the duty of recognizing those facts, it is quite certain that science would have slumbered from the creation of the world down to the present time.

To Dr. Pereira’s question, “What effect can be expected from one or two decillionth parts of a drop of laudanum?” the only answer must be, “None, save such as experiment shall have warranted.” A grain and a half of phosphorus have been known to cause death; but if the question were asked of a person who had never seen it before, “What effect can be expected from this agent?” he would of course reply, “I cannot tell until I have made experiments with it. If I eat it and find that it agrees with me, I shall say that it is wholesome; if I find that it causes illness, I shall say that it is a poison.” This, at least, would be a natural answer; but Dr. Pereira would apparently think him a wiser man if he were to give an answer by guess, and to contend, supposing his idea were not confirmed by experiment,

* See *ante*, page 79.

that the guess is to be relied upon, and the experiment rejected.

The following is Dr. Pereira's objection, under the fourth and last head :

“ Homœopathia has been fairly put to the test of experiment by some of the members of the *Académie de Médecine*, and the result was a failure. Andral tried it on 130 or 140 patients *in the presence of the Homœopathists themselves*, adopting every care and precaution, yet in not one instance was he successful.”

To this objection, which Dr. Pereira urges on the authority of an anonymous writer in the *Medical Gazette*, the best answer will be conveyed by the following extract from Dr. Curie's *Principles of Homœopathy* :

“ To Dr. Andral it is quite impossible to make any specific, precise, and critical reply, *because no Homœopathist witnessed the numerous experiments which he states himself to have made* ; but, as he consulted no one on the proper manner of making them, we think it may, at the first sight, be fairly presumed, that he was not acquainted with the specific medicine for each case, nor with the precise and essential conditions on which success depended. This will speedily receive confirmation.

“ A short time, indeed, previous to the discussion of the question of Homœopathy by the *Académie de*

Médecine, Dr. Andral mentioned in course of conversation with the author of this work, that although he had directed his attention to the subject, his mind was not made up as to its merits, and frankly avowed that he knew very little about the practice involved in the new doctrines. How then could M. Andral, who acknowledged that he had scarcely acquired the elements of Homœopathic practice, venture to pronounce sentence on these doctrines? What opinion would be formed of a jury which should condemn before it made itself acquainted with the facts of a case? Yet such precisely was M. Andral's position!

“But there is a fact to be stated here which is perfectly decisive as to M. Andral:—he had absolutely no guide in the prescription of Homœopathic medicines, and he made a wrong application of every one that he employed, as has been clearly shown in the *Archives de la Médecine Homœopathique*, Tome Premier, No. 1, for July 1834.—No comments or details can add force to this decisive fact.”

Having thus considered “the principal facts” to be urged against Homœopathy, we can sufficiently estimate the value of any minor objections which may have been raised, without taking the trouble to enter into an investigation of them.*

Apart, however, from Dr. Pereira's admission that there are no other principal objections against

* Appendix D. Minor Objections against Homœopathy.

Homœopathy than those which he mentions, and which, as we have just seen, have no real existence, there is sufficient evidence that the opposition to the system has hitherto been founded only upon ignorance and prejudice, and these moreover of the worst description ;—since no ignorance is culpable save that which is voluntary, and no prejudice is so reprehensible as that which is suffered to bear upon large questions of human welfare, and which hurries men to persecute and revile those who (whether their peculiar views may be right or wrong) seek only to discuss such questions with candour and forbearance.

In England during the last few years, three events have occurred in connexion with Homœopathy, which have brought that system and its opponents in conflict before the public. An examination of the positions respectively occupied by the parties on these occasions will enable us to judge how far they may be described as conflicts, in which reason and calmness on one side, were met by ignorance and prejudice on the other.

The contending parties on these occasions were,

1. Mr. Newman—a Homœopathic practitioner, of Glastonbury in Somersetshire, against the Poor Law Commissioners and the Royal College of Physicians.
2. Dr. Epps against the “Lancet,” the leading weekly medical journal of London.
3. Dr. Curie against the Coroner for Middlesex.

To begin with the case of Mr. Newman. Ten years ago this gentleman was appointed medical officer to the poor of Glastonbury: after having held that appointment for four years his attention was attracted to the Homœopathic doctrine, and upon testing the system by experiment, he became so convinced of its efficacy as to adopt it, first in his private practice, and then in his treatment of the poor. He had pursued this course for some time when, in 1843, a rival surgeon in the neighbourhood made complaint against him to the Board of Guardians, for “adopting a system not recognized by any college in Europe,”—as if the recognition of new truths was likely to proceed from colleges in the first instance, and from individuals afterwards. The Guardians declined to interfere, and the disappointed surgeon then applied to the Poor Law Commissioners. These gentlemen, upon instituting an inquiry, were informed by the Board of Guardians that they, the Guardians, were perfectly satisfied with Mr. Newman, and that no complaint of a want of skill or attention had ever reached them. At the same time they forwarded to the Commissioners a statement of the results of Mr. Newman’s practice for the year 1842, showing the singularly small mortality of 21 patients out of 1,085 cases.

Shortly after this, the Guardians again confirmed Mr. Newman in his appointment by a majority of 17 to 3. But the matter was not suffered to drop,

and Mr. Tuffnell, Assistant Poor Law Commissioner, came from London to inquire into the circumstances. The Guardians repeated that they were perfectly satisfied; adding, that they would take upon themselves the responsibility of the appointment: and it was then accordingly confirmed by the Poor Law Commissioners.

The influence of the rival surgeon having thus completely failed, Lord J. Thynne, a resident in the neighbourhood and a patron of the complainant, was induced to take up the question. It will be surmised that, as the matter had been already investigated and settled, any new attempt to re-open it must have been rejected as unjust and vexatious; but strange to say, the charge upon which judgment had already been pronounced was, apparently in deference to the noble applicant, again entertained by the Commissioners. Of course, after the thorough investigation they had bestowed upon it through their Assistant Commissioner, these gentlemen could come to no new view on the subject, even to oblige his Lordship; but a mode occurred to them of getting out of their trouble, and of escaping the ratification of their own deliberate judgment:—they resolved to take the opinion of the College of Physicians!

The College of Physicians upon thus being called to decide whether Mr. Newman was in the right in declaring the practice of the majority of the College to be wrong, came to a more liberal conclusion

than under the circumstances could have been expected. It answered, however, the purpose of the Commissioners, although in the main it was not unfavourable to Homœopathy, being simply to the effect, “that a person who practises *exclusively* the Homœopathic system, is altogether unfit to be appointed to the situation of medical officer to a union.”

Upon this the Poor Law Commissioners intimated to Mr. Newman, that if he did not resign, they would take steps to remove him. Mr. Newman answered by declining to resign; assigning, among others, the following reasons: 1. That he was legally qualified to practise, and was not aware of any exclusive system binding on a medical man other than what was dictated by his experience and conscience. 2. That he had held the appointment for eight years without any complaint having been made against him. 3. That the Poor Law Commissioners themselves, after a special inquiry into the case, had reported that, “under the circumstances, they did not feel called upon to make any objection to Mr. Newman’s continuance in office.” 4. That the poor of his district had expressed their desire to remain under the Homœopathic treatment, and had transmitted a petition with 838 signatures to that effect. 5. That it was his duty to adopt the Homœopathic system, “because the mortality is smaller, the duration of illness shorter, and consequently the expense in sickness much less; it ap-

pearing from the statistics of sixty-four of the most celebrated hospital in Europe, including the Hôtel Dieu in Paris, Charité in Berlin, the General Hospital in Vienna, St. Thomas's and St. George's in London, and the Royal Infirmary in Edinburgh, that the average mortality under the old treatment is nine per cent, and the mean duration of disease twenty-nine days; while the results from the Homœopathic institutions at Leipzig, Vienna, Munich, Brieg in Silesia, and Hungary, show an average mortality of only four per cent, and a mean duration of twenty-one days: also, that in the treatment of cholera the average mortality was thirty-one per cent under the old system, and only eight per cent under the Homœopathic."

The reply to this was a *dismissal* from the Poor Law Commissioners, with which the affair terminated. The Board of Guardians had, of course, no power to resist the mandate, but they took occasion to express their sense of the course which had been pursued by transmitting to Mr. Newman a unanimous vote of thanks for his humane and "successful" treatment—a copy of which they also forwarded to the Commissioners.

A more complete case of blind and unscrupulous persecution than these facts set forth has perhaps hardly ever been known in the history of science. On this head, therefore, no comment is required. But there are some curious considerations suggested by the statement of the Royal College of Phy-

sicians, to which it is desirable to call attention. "The first of these," to quote from some remarks made at the time by an influential journal, "is as to the extent to which the College are acquainted with the results of the new system; and whether they can contradict, explain, or confirm the statements put forward as to its diminished mortality? Next, supposing that they have the power to throw some light of this kind upon the subject, whether they should not at once exercise it, in order to disabuse the public mind? and supposing that they have not the power, whether it is proper for them publicly to condemn a legally-qualified and responsible practitioner for pursuing a method of which they are totally ignorant? An inquiry also suggests itself, whether there is *any* system of practice really recognized by the College of Physicians—Antipathic, Allopathic, or Homœopathic? and, supposing that neither is definitively recognized, and that, according to their view, nature acts in the solitary instance of medicine by partial instead of general laws, to what extent and in what proportions may the three be blended? Their report creates more dissatisfaction among the members of the old school than among those of the new; for it does not condemn the practice of Homœopathy, but only a uniform and consistent adherence to its principles. It may be practised, but not *exclusively*!"

It will thus be seen that the Royal College of Physicians absolutely sanction the system so long

as it is not adopted with scrupulous rigidity—for they fix no limit to its recognition further than by stipulating that, at the discretion of the practitioner, it shall sometimes be departed from. If Mr. Newman had chosen to vary his Homœopathic treatment by an occasional Allopathic dose, (and it is to be feared there are a large number of Homœopaths who, from deficient experience, and to gratify the popular prejudice in favour of purgatives, actually resort with some frequency to this method,) he could no longer have been charged with practising it exclusively, and his very want of skill would have brought him under the approval of the College. It is therefore only against the most honest and consistent practitioners of the new system that the denunciation of this body can be intended to take effect.*

The next instance of a public contest between the Homœopaths and their opponents, is that of Dr. Epps and the *Lancet*,—the particulars of which may be very concisely stated :

It appears that, after an extensive practice of the old system for many years, during which he had been a frequent contributor to the *Lancet*, Dr. Epps was induced, as the only fair mode of judging Homœopathy, to test the system by experiment. The result in his case was the same as in Mr. Newman's,

* Newman's Exposition of Homœopathy : with an account of the Author's dismissal from the Wells Poor-Law Union. Leath, London.

and he became fully satisfied of the truth of the doctrine,—a circumstance which, of course, left him no choice but to adopt it in his practice, however dangerous to his pecuniary interests such a step might seem. As the best way of proving himself right or wrong, he continued, after his conversion, to send an account of his most noticeable cases to the *Lancet*, so that in the event of these cases being open to objection, or involving any fallacy, his medical brethren might have the opportunity, which they could not otherwise possess, of pointing out where his errors lay. These communications, however, with one exception, were all rejected, upon the grounds detailed in the following letter:—

THE LANCET TO DR. EPPS.

9, Cambridge Square, Hyde Park.
November 9th, 1844.

“DEAR SIR,

“I have been requested by Mr. Wakley, in returning your communications, to express how much he regrets his inability to insert them in the *Lancet*. Although he entertains himself opinions far different from those which you uphold, he would willingly have given your cases a place, had it not been for the determined opposition of the subscribers and readers of the *Lancet* to anything in the shape of Homœopathy. When your case of hæmatemesis was inserted last winter, we received an avalanche of letters from all parts of the country, couched in

such terms as to make it next to impossible for us to insert any further communication of the kind. Mr. Wakley's personal regard for yourself has induced him to hesitate about returning your cases; but he has, at last, felt it imperative upon him to do so; and he has particularly desired me to convey to you his great regret at being compelled to take this course.

“ I remain, Sir, very truly yours,

“ HENRY BENNET, M.D., *Sub-Editor*.”

John Epps, Esq., M.D.

This letter gave Dr. Epps an advantage of which he immediately availed himself. He published the rejected cases, together with a letter to Mr. Wakley, showing that gentleman the position in which he had placed himself by refusing to insert these cases, for no better reason than that he had been frightened by the threats and protestations of his readers. Dr. Epps pointed out to him that the only grounds to justify a medical journal in refusing to insert medical facts would consist—1. In the stater of the facts not being a man of veracity. 2. That the stater is not qualified to form a judgment; and 3. That the facts stated are not interesting or useful. With regard to the first objection, Dr. Epps naturally assumed that it could not exist in his case; the second he proved to be inapplicable by mentioning that he is a graduate of the university of Edinburgh, and a London practitioner of twenty

years' standing (Mr. Wakley, moreover, having already settled the question, as far as he is concerned, by having repeatedly availed himself of Dr. Epps's communications); — while the third was signally proved to have no existence, by the circumstance that the publication of merely one of the cases drew forth an *avalanche* of letters.

The termination of this affair, therefore, obviously leaves the *Lancet* and its readers in a most discreditable position. The former, although professing to lead public opinion, is shown to have no power of acting against existing prejudices. The facts which prove palatable to its subscribers are put forth; those which are unpalatable and which would injure its sale, are suppressed, and the journal, on the humiliating confession of its editors (a confession, perhaps, never before so plainly announced), is compelled, on a matter of the broadest scientific interest, to restrict itself to the admission of evidence on only one side of the question. If the *Lancet* had been in existence at the time when the doctrines of the circulation of the blood, and of the prophylactic power of vaccination were struggling, as Homœopathy now is, against the blind resistance of the profession, it would have afforded no little aid in retarding the reception of those truths. The “avalanche” of letters that would have been received upon the first insertion of any fact in favour of Dr. Jenner's “nonsense,” would, even in those less literary days, have been more fearful than that to

which, in the present instance, Mr. Wakley has unfortunately been exposed.

With regard to the *readers* of the *Lancet*, or at least such of them as contributed to the “avalanche,” little need be said; they are to be regarded as children who shut their eyes to escape what is disagreeable, since, by suppressing the evidence of a fact, they seem to fancy they destroy the fact itself—just as the Hindoo demolished the microscope to escape the conviction that he had been eating animals. It appears that not one of their letters could have contained anything beyond a threat, since arguments to call in question Dr. Epps’s statements and conclusions would, of course, have been readily published. Mr. Wakley, in fact, defines their character. It was merely that of “determined opposition to *anything* in the shape of Homœopathy,” and they were “couched in such terms” as to render it “next to impossible” for him to give insertion to communications to which he would otherwise “willingly” have given a place, and which therefore he must have considered deserving of publication. In his opinion, therefore, his readers stand convicted of refusing to hear evidence in relation to Homœopathy, which it was fitting and just should be presented to them;—and it is needless to call for a severer censure than this fact involves.*

* The Rejected Cases; with a letter to Thomas Wakley, Esq., on the scientific character of Homœopathy. By John Epps, M.D. London. Sherwood and Co.

In the third and last instance in which Homœopathy was forced upon public attention by the conduct of its adversaries, the contest lay between Dr. Curie and the Coroner for Middlesex.

In March 1845, an inquest was held on a Mr. Henry Cordwell, at which Mr. Wakley presided as Coroner. From the evidence adduced, it appeared that the deceased had, some days preceding his death, been under the treatment of Dr. Curie, and that, owing to the case being one of fever, coupled with chronic disease of the intestines, Dr. Curie had ordered him to abstain entirely from food, and had considered it necessary to continue this prohibition during a period of ten days.

It also appeared that the deceased, on the second day of abstinence, had expressed his belief that food would not have stayed on his stomach if he had taken it, and that during the entire ten days he had stated his satisfaction and surprise at the effects produced by the medicines administered, and his perfect confidence that he was under the best possible treatment. During all this time he was constantly teased by a lady who visited him as a friend, and by the hired nurses who attended him, to disobey the injunction which he had received regarding food; but with the exception of being once induced to take some barley water, he firmly refused, expressing at the same time his conviction that his life possibly depended upon his compliance with the rules laid down. When he was approaching conva-

lescence, and just before the period at which Dr. Curie had intimated an intention of allowing him gradually to return to food, for which at present there was no appetite, he was seized with violent hemorrhage from the bowels,—an accident to which he was constitutionally predisposed, and which, as it afterwards appeared, was brought on by a fit of passion at the misconduct of a nurse. Dr. Curie was sent for, and, apparently through the medicines which he administered, the hemorrhage was by the following morning almost entirely subdued; while the patient, who had nearly sunk under its effects, had again considerably revived. At this period too, in order to ascertain if his stomach could yet receive food, a teaspoonful or two of beef-tea was directed to be given; but it was no sooner administered than he threw it all up again, and thus gave ample proof of the necessity for Dr. Curie's caution.

During the time the patient was in this low state, his friend, a Miss Sharp, the lady who had used her efforts to induce him to disobey Dr. Curie's orders, obtained the concurrence of other connexions of the patient, (and, as it came out in evidence, greatly to his annoyance,) to dismiss Dr. Curie and to call in Dr. Roots and a Mr. Headland. These gentlemen immediately attended, and ordered medicine and food of all kinds in frequent and considerable quantities, "beef-tea, and arrow-root, champagne, chicken-broth, and brandy;" but the result merely confirmed Dr. Curie's view, since his stomach would not retain

anything, and, of course, he must have suffered severely from the effort required to reject what was taken. After being three days under the hands of his new attendants (during which time Dr. Curie never saw or heard anything of him) the unfortunate patient died.

Throughout the inquiry (which had been instituted by Mr. Wakley, to the surprise of Dr. Roots and Mr. Headland) no question whatever was raised as to the propriety of Dr. Curie's treatment. It occurred to Dr. Epps, however, who was present, to suggest that perhaps Dr. Curie might like to say a few words before the proceedings closed; but Mr. Wakley at once, with great apparent frankness, replied to this by saying, that *as no charge had been made against Dr. Curie by the medical men who had been examined*, he should advise that gentleman to be silent, with which advice, coming from a Coroner who was himself a medical man, Dr. Curie of course complied.

After this, the jury delivered the following verdict:—The jury are of opinion, that Henry Cordwell died from exhaustion, caused by loss of blood, produced by natural disease; and in complying with what the jury believe to be their bounden duty, in returning their verdict in strict accordance with the sworn evidence of the medical gentlemen who have been called as witnesses, the jury cannot refrain from expressing the strongest feelings of disgust and indignation at hearing it proved by the

testimony of the nurses, that the afflicted gentleman had been cruelly exposed to a system of starvation while in a state of the most extreme debility during at least ten days previous to his death ; he having, during that long time, been allowed nothing but cold water by the advice of his medical attendant !

Upon the delivery of this verdict, Mr. Wakley, the Surgeon-coroner, who had just recommended Dr. Curie to say nothing, as there was no charge against him, exclaimed, with considerable emphasis, "If I were a juror, I have no hesitation in saying, that I should most cordially agree with the observations just read." Mr. Burra, Dr. Curie's legal adviser, then attempted to address the Court, when the Coroner instantly silenced him, and ordered the proceedings to be closed.

Now, although the Homœopathic system was not called in question in this case, (the evidence indeed, so far as it went, tending to show the singular efficacy of the medicines administered,) there is much to excite a suspicion that the whole proceedings were got up with the view of damaging a Homœopathic practitioner. The Coroner knew (or, at least, ought to have known, for he is himself a surgeon, and professes to have an opinion of the absolute necessity of medical knowledge on the part of a coroner), that abstinence for a much longer period than ten days is very frequently essential in cases of fever, and that the duty of the practitioner to enforce it is strongly insisted on by

almost every medical writer of eminence. In some of the most perfect cases of recovery recorded by Drs. Andral and Louis, the periods of abstinence are known to have varied from ten to *twenty-seven* days; and every intelligent physician is aware, that one of the greatest evils a medical man can commit, is to pander to the popular idea, that food is always nourishing, whether the patient can digest it or not. "The sick man's friends, in their anxiety to support his strength," says Dr. Andrew Combe, "too frequently turn a deaf ear to every caution which is suggested, and stealthily administer sustenance when the system does not require it, and when it serves only to aggravate the danger, and increase the weakness of the patient." Now as Mr. Wakley did not ask a single medical question as to the state of the patient while he was under Dr. Curie's care, it is evident he could not have known what might have been the extent of abstinence required; and he must be held, therefore, as contending, against all the medical authorities, that ten days' abstinence is, under any and all circumstances, an improper time; and that although Messrs. Andral, Louis, and most other practitioners of large experience, have constantly ordered such abstinence, with the most beneficial results, those gentlemen are only to be regarded with the "strongest feelings of indignation and disgust."

From this position, so damaging to his medical reputation, it seems impossible for Mr. Wakley to

escape, unless by a confession which would prove still more damaging to his reputation in another way. Dr. Curie, shortly after the inquest, published a full account of the case, showing not only from reason, but from the writings of the most esteemed authorities, the strict accuracy of the course he had pursued ; and the rebuke with which he concludes this statement will serve to show that the Coroner for Middlesex, in his attack upon Homœopathy (in the person of one of its practitioners), arrived at no better fate than that which had been previously attained by the Poor-Law Commissioners, the Royal College of Physicians, and the Editor of the *Lancet*.

Dr. Curie writes,—

“Having thus shown that it cannot fairly be inferred that the case was hopeless when I left it, or when Dr. Roots and Mr. Headland were called in,—I have finally to remark that even apart from the proof which I have given, from every fact of the case, of the strict accuracy of the treatment which I pursued, the verdict of the Jury could still only be regarded as proceeding from minds blinded by prejudice to the commonest rules of reason. That I gave constant attention to the case, that I could have had no object but to preserve the life of my patient, and that nothing but a conscientious feeling could have induced me to adopt a line of treatment which not only rendered me unpopular to Mr. Cordwell’s friends, but even brought upon me the reproaches of the Nurse (who anticipated Mr. Wakley by telling me that “it was too bad to give a sick man nothing but water”), must have been perfectly obvious ; and, therefore, even if the treatment could have been shown to have been of the most mistaken kind, there could have been nothing to justify any expres-

sion of 'indignation and disgust.' If, when I had found that starvation was broadly objected to not only by those who in their view in such a point may be supposed to present a fair type of the state of public opinion, but even by professed nurses, I had lost no time in making a declaration that I was ready to give food whether I had reason to believe my patient could digest it or not, I might then perhaps have been a fair mark for an unequivocal expression of rage ; because I should then have shown that rather than run any risk of damaging my practice or of giving my more yielding colleagues an advantage over me, I was ready to sacrifice the established rules of art and to pander to the prejudices of the hour.

"Although, however, the verdict of the Jury was thus obviously reckless and unjust, I feel that it was the result of ignorance (and I use this word not offensively, but merely as regards their fitness to dogmatize in medical cases), and that it was not in the slightest degree based on any feeling of personal malignity. Their prejudice against abstinence in the abstract was a very natural one, and in the absence either of ability or of willingness on the part of the Coroner to correct that prejudice, it was equally natural that it should find expression. But as regards Mr. Wakley, the case is very different. It will be observed from the report of the *Morning Post*, that at the conclusion of the examination of the witnesses, Dr. Epps kindly suggested that I might be desirous of explaining to the Jury the reasons by which my treatment had been dictated : that Mr. Wakley said in reply, that no charge had been made against me, and that he advised me therefore to say nothing ; and that I then contented myself by observing that *as no charge had been made*, I was, of course, perfectly satisfied. It will be seen that after this the Jury came to their verdict with its condemnatory addition, and actually sent forth to the world their expression of indignation and disgust, towards a person *against whom no charge had been made*, and who in their presence had actually been led by the Judge on that account to believe, that all explanation or justification on

his part was wholly unnecessary ; and finally, that that very Judge joined, 'with considerable emphasis,' in the intemperate denunciation. Mr. Wakley, therefore, may be held to have reasoned thus :—'There is no charge openly made against Dr. Curie, but the evidence, to my mind, is such as to create, if it be left without remark, a strong feeling of indignation and disgust, and which, I presume, will be shared by the Jury. For reasons best known to myself, I desire that no attempt should be made to remove this impression ; and although it is my duty both as a Judge and as a man, to advise Dr. Curie to act as I would act myself if I knew such a feeling to exist against me, namely, at once to offer a justification of my conduct, I will lead him to believe that we are perfectly satisfied, and that under such circumstances it would look as if he himself had misgivings, if he were to enter into any remarks. All danger of explanation removed, I can then make my assault, and when Dr. Curie discovers the trap that has been laid, and attempts either by himself or his friend to protest against it, I can put him down by the authority of my office, and declare the Court to be closed.'

"When in addition to this it is considered that the inquest was called upon anonymous communications ; that it is unprecedented to hold inquests upon the bodies of persons dying of protracted disease under the regular attendance of qualified practitioners ; and that the present case was such, that Dr. Roots and Mr. Headland took upon themselves to order a *post-mortem* examination, 'having no idea that an inquest would be held ;' it is impossible not to recognize the extent to which the office of Coroner, when held by professional persons, may be made use of to assail a rival practitioner, and the danger which exists of the practice becoming common, if it be not at once met and exposed. In the present case, as I have shown, the verdict had nothing to do with Homœopathy, because the medical treatment of the deceased was not called in question ; but as Mr. Wakley knew me to be a Homœopathic practitioner, and as the *Lancet*, of which he is Editor, is irretrievably committed in opposition to

that system, it is not difficult to see that a temptation was presented to him, or unfair to infer that this temptation proved too powerful for him to resist.

“In conclusion, I would remind the public, as a Homœopathic practitioner, that the dispute which now divides the medical world into Homœopathists and Allopathists, is hardly likely to be settled with advantage to the cause of truth, by referring it to the decision of either of the parties interested ; and that although it may be in the power of a partisan Coroner to damage those of the opposite practice by summoning inquests, not merely on all who die under their hands, but on all who after being under their hands may die under the treatment of their opponents, the real question at issue must remain to be decided by fairer means,—namely, by a comparison of the mortality occurring in an equal number of cases of any given disorder under the Homœopathic and Allopathic treatment. The value of the dietetic doctrines of Mr. Wakley, in contradiction to my own and to those of the authorities whom I have quoted, may be tested by simpler means. If those who are called to watch by the bed-side of persons suffering from inflammatory disorders, will observe the effects that usually follow the administration of food in the absence of appetite, and before the period of decided convalescence, and will communicate these observations to their friends, and, as far as practicable, to the public, all doubt upon the question will speedily be removed. For my own part I believe that, amidst all the consequences of injudicious treatment, there are none more fatal than those which arise from this cause ; and, entertaining that belief and recognizing that no earthly authority can absolve me from my responsibility, faithfully to act up to it, my course will be calmly to meet all the opposition it may occasion, and to trust to time for my justification.” *

* Verdicts of Coroners' Juries. The Case of Mr. Cordwell, by P. F. Curie, M.D. London. S. Highley.

From these three cases the character of the opposition directed against Homœopathy will be clearly seen, and it will not require much consideration to enable us to determine how far it is entitled to be regarded as affording evidence of the unsoundness of the system. In the first instance, a practitioner is expelled from a public appointment, which he had filled with acknowledged success, for no other reason than that he conscientiously avows his recognition of the doctrine : in the second, a distinct avowal is put forth, that medical men will not consent to receive *evidence* of any kind in relation to it : and in the third, a significant example is afforded of the readiness of a public functionary to resort to means to damage its practitioners, which if adopted towards the practitioners of the old school, would be followed by an outcry which would insure his speedy removal. In the intimations thus given, that every public officer daring to recognise the system will be dismissed, that no arguments or evidence will be received by the profession, and that even judicial power, when it happens to be held by an interested party, may be used as a method of annoyance without one word of reproof being raised by those who, if it were in like manner directed against themselves, would speak in a voice of thunder, we see unmistakeable evidence of that blind anger which is only felt by men who distrust the inherent soundness of their cause. When, too, with all these means of persecution available, we

find that the opponents of the system do not feel themselves secure without the employment of personal abuse,—that it is considered necessary to speak of Hahnemann as an “impostor” and a “monster” who has “endeavoured to corrupt the fountains of science, and dethrone the human mind,”*—and to recommend, with regard to his followers, that they should be treated “as liars, cheats, and swindlers,”†—the conviction becomes irresistible that a want of power to bring any sound or conclusive argument against the system must be generally felt; and that the whole history of the measures hitherto adopted for its overthrow, is only to be regarded by a dispassionate inquirer as affording evidence of its truth.

* These expressions are used by Dr. Alexander Wood, Fellow of the Royal College of Physicians of Edinburgh; Emeritus President of the Royal Medical Society, Lecturer on the Principles and Practice of Medicine, &c., &c.

† “A correspondent inquires whether a man who ‘turns’ Homœopath should be allowed to hold a dispensary, or be recognized as a member of our profession, or a Fellow of the College to which we belong? We answer with an emphatic negative. The man who does so, no matter what his necessities may be,—no matter how much it may be his interest to pander to the vile follies of a circle of imbeciles,—must cease to be a member of the medical profession, and must become disqualified to hold any public situation. We even go farther, and assert, that by taking such a step, he resigns his place in society as a man of honour and a gentleman, and takes his position as a liar, a cheat, and a swindler!”—*Dublin Medical Press*, Sept. 10th, 1845.

CONCLUSION.

HAVING thus concluded our inquiry regarding the principle, theory, and practice of Homœopathy, it will, perhaps, occur to those who may view the system with favour, to speculate upon its probable progress. It will seem that, if the system be true, the daily cures which are sure to be performed under it must rapidly bring conviction to the public mind, and that consequently only a very short period can be expected to pass before its universal recognition. A little reflection, however, will convince us that these anticipations are not to be depended on, and that it is desirable for those who most clearly recognise the truth of the doctrine to prepare for a long, and what must oftentimes prove a disheartening struggle, before it can be firmly established.

In the first place we must look at the generally slow progress of new doctrines, and we shall see that not unfrequently this slowness is in direct proportion to their real importance. The greatest doctrine ever bestowed upon mankind has now been preached for eighteen hundred years, and although every hour of each man's life might serve to illus-

trate its truth, it is still absolutely rejected by a large majority of the world, while it is also decried as "inapplicable," even by its professors, whenever it is insisted upon as the only true foundation for the actions alike of individuals and communities. If then a palpable truth, addressed to mankind at large, embracing every interest, and illustrated and confirmed by each passing fact, is thus derided by the many, and practically neglected even where it is not derided, the advocate of a truth relating merely to a special department of physical science should be well prepared to submit to indifference and neglect, and should at the same time bear in mind, that its proportionably quicker progress can only result from its comparative insignificance. If great truths were usually such as could be generally received by the age to which they are presented, their discoverers, instead of being men in advance of their time, could merely be regarded as persons who had luckily stumbled upon a new thing which every one else was equally prepared to recognise and appreciate so soon as it should be similarly presented to them.

The respective degree of ability to recognise truth, forms the only distinction between different minds, and if a wholly novel truth were, in any case, simultaneously received with equal ardor and clearness by the trained and the untrained, (and by training I mean not merely intellectual but moral advantages,) we should then be entitled to infer that, as

far at least as such truth had been concerned, these respective conditions of mind had not been of the slightest importance. But we do not find this to be the case; and it is therefore the privilege of those who believe themselves to be engaged in a true cause, to believe also, that by the hostility they are called upon to overcome, they may measure the height to which, as far as relates to that cause, they have reached beyond their fellows.

Judging therefore from the importance of Homœopathy, as a branch of physical science, we may assume that it will yet have much to contend with. Experience is sufficient to bring us to this conclusion, even if we could not see any of the direct causes from which difficulties may spring; but as some of these causes may even now be detected, it may be well to glance at them, and thus,—in so far, at least, as they are concerned,—to avert future disappointment.

It must be borne in mind, that the majority are apt in all cases, to judge rather from the narrow facts that may come immediately under their own observation than from any process of comprehensive reasoning. We may present a man, day after day, with statistics concerning the fires that occur in the town where he resides, and show him by the clearest evidence the chances of such an accident, and the propriety of effecting an insurance; but although our statement may embrace several thousand instances, it will not have so powerful an

effect as would be produced by the partial burning of a house within a few doors of his own. In like manner therefore, the majority of converts to Homœopathy will derive their faith, not from its broad evidences and a sense of the general reasonableness of the system, but from certain remarkable cases which they may chance to have seen with their own eyes. Now this kind of faith, although it is usually the most ardent while it lasts, is very uncertain and deceptive. The person who believes in Homœopathy because he has seen his neighbour's child cured, will be very enthusiastic so long as he finds similar results take place; but if one of his own family were to fall sick and die under Homœopathic treatment, this fact, more startling to his mind than any other, would assume a greater prominence than all that had gone before, and he would then be very likely first to grow cool to the system, and next to regard it with that kind of animosity which is peculiar to those who apostatize from a faith to which they have once ardently belonged. He would not test the system by the proportionate mortality of an equal number of similar cases treated in the old way, and bear in mind, that under any method, a certain number of deaths must occur, and that he had made choice of that which experience shows to yield the most favourable results; but would only remember the one fact that had impressed him more than all others, namely, that *his* child had died,—a fact which he would never be able to render

subordinate to a less personal and larger view. He has believed in the new system, merely because he has seen some cases of cure; and when a different result takes place, he has nothing to fall back upon. He has no argument to show that if Homœopathy has failed, every other method would certainly have failed also; while at the same time he feels, that if he had pursued the old system, he would have had the sanction of the world, from whom the death, occurring under "the best advice," and in the ordinary way, would then have called for no remark.

Recognising, therefore, that a large proportion of its converts will be of this description, we must expect a constant re-action against the system, which, although not ultimately hurtful, must have the effect of rendering its progress steady rather than rapid. All who fall away from the truth, produce at the time a greater effect than would result from the accession of twenty times their number; but we must remember, that by the withdrawal of those who are unfitted to act as its propagators, the real followers of the doctrine are rendered more compact, more cautious in selecting their allies, and more sensible of the necessity for constant efforts towards unfolding and perfecting it.

Another source of injury must arise from the fact, that not only many of its ordinary converts will come under the above description, but also many of its professional ones. Practitioners converted rather from witnessing the effects of the

treatment in a certain number of individual cases, than from the combined action of observation and reflection, will take up the system without any clear perception of the universal application of the law on which it rests; and will therefore be tempted, whenever any difficulty occurs, to seek to cut it short, by resorting to the old methods. Not being able to comprehend a general law, they will believe that Homœopathy is good “to a certain extent;” and when they find themselves unable to produce satisfactory results, they will attribute to an imperfection in the *principle*, that which proceeds solely from their own want of skill and experience in carrying it out. Circumstances have shown that conduct of this sort will eagerly be seized upon and exposed by the opponents of the system, and produce an effect upon the public. Exposures, indeed, of the inconsistencies of some Homœopathic practitioners have already been put forth, which, although correct in themselves, are liable to obstruct the cause, because they dishonestly represent Homœopathy to be implicated in the follies of all those by whom it may be professedly recognised and practised.

It must also be borne in mind that even when a practitioner thoroughly recognises the principle, much care and experience is requisite towards its successful application. It does not follow because a person places himself under a Homœopathic practitioner, that the remedies perfectly Homœopathic to

his symptoms are sure to be hit upon,—or even if such should be the case, that they should be administered at such intervals or in such proportions as to effect a cure in the speediest possible way. Yet many persons, after taking one or two doses of medicine, would not hesitate to assert that they had “tried” Homœopathy, and thus utterly to condemn the system, because the practitioner had proved himself not infallible.

Another cause from which failures are liable may also be pointed out. In the treatment of disease there are many things to be attended to beyond the administration of medicine. Among these the most important is the regulation of diet. Now in this respect there are remarkable differences among Homœopathic practitioners. There is one body, for instance, who adopt the views of the Allopathists on this subject, and who coincide with Dr. Andrew Combe, Dr. Barlow, Dr. Forbes, Dr. Tweedie, and other eminent physiological writers of the old school, in maintaining that the diet of patients should always be regulated in strict conformity with their powers of digestion, and that in no case should food be given which the digestive organs are unable to deal with; while, on the other hand, there is a body who unequivocally repudiate this doctrine. This is not the place to attempt to decide between these conflicting opinions (further, perhaps, than to remark, that the view of the first party, and of the authorities above mentioned, is most in accordance

with the Homœopathic principle ; since when nausea and want of true appetite are amongst the symptoms, it would be anti-pathic to endeavour to overcome those symptoms by presenting stimulants to the palate) : but it will be seen, that whichever doctrine is the correct one, those who follow its opposite must commit errors which, in critical cases, may lead to a fatal result, even when the medicines administered may have been perfectly well chosen. Until harmony of view, therefore, shall have been arrived at on important questions of this nature, failures must repeatedly occur under Homœopathic practitioners which, it is probable, the public will not sufficiently discriminate from the results of the medical treatment.

It must also be borne in mind, that Homœopathy lies under the disadvantage of demanding, on the part of those who come under its influence, an abstinence from many pernicious though agreeable habits of living ; and that this will probably form no slight element of unpopularity. The Homœopathic practitioner does not permit his patient to counteract one medicine by taking another at the same time ; nor does he recognise, that substances having a powerful medicinal action can at any time be desirable articles for healthy persons. Thus, strong tea, coffee, ale, wine and spirits, tobacco, &c.,—things which with some individuals, make up the greater part of life's enjoyments, are at all times discouraged, as tending to disturb health,

while during treatment they are positively forbidden.

When, in addition to these considerations, we recognise the circumstance mentioned in the last chapter, that the great body of medical men have signified their determination not to look at the facts of Homœopathy ; * that the members of this body in London alone amount to upwards of two thousand, and that there is scarcely a family which has not some connexion with the profession likely to produce an influence in leading to a similar determination ; that no medical man holding a public appointment can avow his conversion to Homœopathy without the danger of immediate dismissal ; that in the metropolitan county of England it cannot be pursued without the chance of a Coroner's Inquest being called in cases of fatal termination, while the thousands who die daily under the opposite treatment are laid in their graves without inquiry ; we shall see how much there is constantly to operate prejudicially on the public mind in relation to the system, and at the same time to deter those of the profession who might be disposed to a candid course from undertaking the responsibility of its investigation.

* Stubbornness of this kind is not without a precedent. Galileo wrote to Kepler : " Here at Padua is the principal professor of philosophy, whom I have repeatedly and urgently requested to look at the moon and planets through my glass, which he pertinaciously refuses to do."

It may also be remarked, that the advocates of the system will do well to anticipate many blows which will be dealt against it, the effects of which can only be partially counteracted. It will sometimes, probably, happen for them to hear an Allopathic practitioner declare in general society that he has tried the system and found nothing in it. A request that he will detail the nature of his experiments will soon enable a judgment to be formed of their value; but amongst ordinary persons, by whom he is looked up to, and when no Homœopathist is present, the bare assertion will be received as effectually settling the matter. It does not follow that, in putting forward this assertion, an attempt to mislead shall deliberately have been made; for the history of science affords many remarkable instances of the way in which persons setting about the commonest experiments with a desire to find them fail, do really obtain this gratification. When Newton announced his discovery of the composition of light, a person named Mariotte, who was very conversant with experiment, was amongst his most energetic opponents; and this philosopher had the misfortune, or good fortune, as he probably considered it, never to succeed in repeating the experiments by which the discovery was to be demonstrated.

It is likewise to be considered, that immediately after the first enunciation of any great principle, circumstances must constantly be expected to present

themselves which may seem to be inconsistent with its action, and which it may consequently be difficult to reconcile. Thus to one who should hear, for the first time, of the law of gravitation, the circumstances of a balloon ascending, or of a fly walking on the ceiling, or of a spider extending its thread from hedge to hedge, or across a road or brook, would seem at once to disprove its truth; whereas, upon his becoming fully acquainted with the processes by which these things take place, he would find that they offer the most complete illustrations of the law to which, at first sight, they appeared exceptions. When Jenner introduced vaccination, he found that there were some persons who had had the cow-pock, as they thought naturally, but who, nevertheless, were found not to have been protected from the small-pox. The circumstance, at first, could not easily be explained, and hasty and credulous objectors would probably at once have run to the conclusion that his doctrine was overturned—but a little patience served to put the matter right. It turned out that there are several diseases communicated by the cow, and that the affection in question had not been of the same nature as that which formed the subject of the great discovery.

In conclusion, it only remains to urge upon those who recognise the doctrine, the responsibility which this recognition involves. It is not enough that they should *use* the truth, and congratulate themselves on the personal advantages they derive from

it. It would never have reached them but for the exertions of others, and these exertions they are bound in turn to take up, so that the light which has been freely bestowed upon them may be as freely communicated to their fellows. It is a common thing for persons to dream of the good they would do if they had but the "opportunity;" but opportunity always lies at our feet if we had but the will to see it. At all events, let those who recognise Homœopathy never trust to the plea that means of usefulness have been denied to them. They must reflect that a great truth has been given to their charge; that this truth is not destined to perish; and that, if those who have been called to carry it forward falter in their task, the *opportunity*, now their own, will be snatched from them and given to others. If they avail themselves of its benefits, and deny it before the world, or coldly withhold acknowledgment of their belief, they will, doubtless, find their reward in the consciousness that they have maintained their popularity and discreetly sacrificed the future to the present. As slaves of opinion, however, it is their fate unfortunately never to know rest: they must shift their course with its shifting tides, and always be on the watch, lest at one time they commit themselves by acknowledging, and at another time by denying, too much;—while, on the other hand, he who relies upon truth, regardless of all else, occupies the same position when it becomes universally received, as he

filled when it was universally contemned. He has, moreover, the consciousness of a task fulfilled; and, looking back at the close of life to the time when the doctrine which it was his privilege to receive was first struggling into view, and tracing it in its gradual extension over the earth, he is able to ask himself, with a glad certainty of the reply, "What has been my portion in this great work?"

APPENDIX.

A.

HOMŒOPATHIC HOSPITAL AT VIENNA.

COMPARATIVE results of Homœopathic and Allopathic treatment in certain acute diseases, furnished by Dr. Fleischmann of the Homœopathic Hospital at Vienna :—

PNEUMONIA.

| MORTALITY UNDER ORDINARY TREATMENT. | | | MORTALITY UNDER HOMŒOPATHIC TREATMENT. | | |
|--|---------------|---------|---|---------------|---------|
| Authorities. | No. of cases. | Deaths. | Authority. | No. of cases. | Deaths. |
| Grisolle . . . | 304 | 43 | Fleischmann . . | 299 | 19 |
| Briquet . . . | 364 | 85 | | | |
| Edinburgh Infirmary | 222 | 80 | | | |
| Skoda . . . | 19 | 4 | | | |
| Total | 909 | 212 | | | |
| Mortality 23·32 per cent., or nearly one out of four. | | | 6·70 per cent., or about one out of fifteen. | | |

PLEURITIS.

| | | | | | |
|--|-----|----|---|-----|---|
| Edinburgh Infirmary | 111 | 14 | Fleischmann . . | 224 | 3 |
| 12·61 per cent., or about one out of eight. | | | 1·24 per cent., little more than one out of a hundred. | | |

PERITONITIS.

| | | | | | |
|---|----|---|--|-----|---|
| Edinburgh Infirmary | 21 | 6 | Fleischmann . . | 105 | 5 |
| 27·61 per cent., or more than one out of four. | | | 4·76 per cent., or less than one out of twenty-five.* | | |

* Introduction to the Study of Homœopathy.

The following well-written remarks on the condition and progress of Homœopathy in Austria will be found in WILDE'S "Austria, its Literary, Scientific, and Medical Institutions :"—

"And although I neither advocate that doctrine, nor slander its supporters, I deem it but the part of truth and justice to lay the following statement before my readers. One of the cleanest and best-regulated hospitals in the town is managed on the Homœopathic plan. The following circumstances led to its erection :—The rapid spread of this mode of treatment in Austria, and the patronage it received from many noble and influential individuals in that country, attracted the attention of the government several years ago, who, with their characteristic jealousy of innovation, then issued an order forbidding it to be practised. As, however, this had not the effect of suppressing it, but as it seemed rather to gain strength from the legal disabilities under which it thus laboured, it was determined, in 1828, to test its efficacy in the Military Hospital of the Josephinum. With this view a commission was nominated, consisting of twelve professors, all of whom, it is but fair to observe, were strenuously opposed to the Homœopathic doctrine. Dr. Maronzeller, a veteran Homœopathist, and a contemporary of Hahnemann, was appointed as the physician, and two members of the commission always attended him during his visit, and, at the expiration of every ten days, reported the progress of the cases under his charge. The only part of the report published is that of Drs. Jager and Zang. It contains a very brief outline of the cases and their treatment, and expresses the surprise of these eminent professors at the happy issue of some of them. The commission, however, as a body, came to the conclusion, that, from the results obtained from their investigations, it was impossible to declare either for or against Homœopathy. One of the twelve, however, subsequently stated his conviction of the efficacy of the system from these trials, and has since remained an open adherent of it.

"Whatever the opponents of the system may put forward against it, I am bound to say, and I am far from being a Homœo-

pathic practitioner, [that the cases I saw treated by it in the Vienna Hospital were fully as acute and virulent as those which have come under my observation elsewhere ; and the statistics show that the mortality is much less than in the other hospitals of that city. Knoly, the Austrian *protomedicus*, has published those for 1838, which exhibit a mortality of but five or six per cent ; while three similar institutions on the Allopathic plan, enumerated before it in the same tables, show a mortality as high as from eight to ten per cent.”

B.

REPORTS OF THE LONDON HOMŒOPATHIC
INSTITUTION.

REPORT OF CASES. No. I.

The following Statement shows the number of Patients treated at the LONDON HOMŒOPATHIC MEDICAL DISPENSARY, Ely Place, and at the LONDON HOMŒOPATHIC MEDICAL INSTITUTION, 17, Hanover Square, from October, 1839, to May 1st, 1844, to be 2753; with the Seat of their Diseases, and the Result of the Treatment.

| Seat of Disease and Result of Treatment. | Total. | Cured. | Nearly cured. | Much improved. | Improved. | Relieved. | Treatment discontinued. | Beginning their Treatment. | Dead. |
|--|--------|--------|---------------|----------------|-----------|-----------|-------------------------|----------------------------|-------|
| Disease of the Brain, Nerves, and Senses | 423 | 174 | 9 | 32 | 37 | 63 | 84 | 17 | 7 |
| „ of Organs of Digestion | 1344 | 561 | 47 | 94 | 170 | 285 | 105 | 65 | 17 |
| „ of Organs of Respiration, Heart, and Blood-vessels | 354 | 157 | 12 | 17 | 17 | 19 | 81 | 28 | 23 |
| „ of the Skin, Bone, and Muscles | 632 | 288 | 26 | 35 | 67 | 91 | 84 | 35 | 6 |
| | 2753 | 1180 | 94 | 178 | 291 | 458 | 354 | 145 | 53 |

| Duration of Illness previous to Patients coming to the Institution. | Prognosis. |
|---|------------------------------|
| From 1 day to 1 year 308 | Favorable 766 |
| „ 1 year to 2 years 292 | Serious 1035 |
| „ 2 years to 5 years 610 | Very serious 613 |
| „ 5 „ 10 „ 431 | Fatal 120 |
| „ 10 „ 20 „ 282 | Doubtful 219 |
| „ 20 „ 30 „ 105 | |
| „ 30 „ 40 and upwards . . 84 | Total . . . 2753 |
| Unknown 141 | |
| Total . . . 2753 | Discharged 2108 |
| | Remaining on books . . . 645 |
| | Total . . . 2753 |

| |
|--|
| 53 deaths in 2753 cases |
| gives 1 death in . . . 51 $\frac{50}{53}$ cases. |

DETAILS AND CLASSIFICATION OF ACUTE AND CHRONIC
DISEASES.

| Acute and Chronic Diseases. | Total. | Cured. | Nearly Cured. | Much improved. | Improved. | Relieved. | Treatment dis-continued. | Beginning their Treatment. | Dead. |
|--|--------|--------|---------------|----------------|-----------|-----------|--------------------------|----------------------------|-------|
| Cerebral affections, Apoplexy, Encephalitis, &c. | 126 | 38 | 2 | 18 | 11 | 25 | 29 | 0 | 3 |
| Epilepsy, Paralysis, Mental affections, &c. &c. | 104 | 48 | 2 | 5 | 1 | 11 | 28 | 5 | 4 |
| Amaurosis, Deafness, Deaf and Dumb . . . | 89 | 26 | 1 | 3 | 13 | 24 | 11 | 11 | 0 |
| Cataract, Fungus, Fistula, &c. | 24 | 5 | 0 | 5 | 1 | 2 | 10 | 1 | 0 |
| Ophthalmia, and Scrofulous Ophthalmia . . | 80 | 57 | 4 | 1 | 11 | 1 | 6 | 0 | 0 |
| Gastritis | 417 | 166 | 10 | 26 | 106 | 81 | 0 | 23 | 5 |
| Enteritis | 55 | 27 | 6 | 6 | 1 | 6 | 8 | 1 | 0 |
| Uterine Ovarian affection, Metritis . . . | 81 | 36 | 1 | 5 | 4 | 20 | 6 | 9 | 0 |
| Gastro-enteritis | 253 | 89 | 8 | 18 | 0 | 77 | 49 | 9 | 3 |
| Gastro entero-metritis | 180 | 42 | 7 | 23 | 35 | 61 | 2 | 8 | 2 |
| Gastro and Entero-bronchitis | 141 | 88 | 9 | 8 | 10 | 0 | 17 | 8 | 1 |
| Gastro-entero-bronchitis | 217 | 113 | 6 | 8 | 14 | 40 | 23 | 7 | 6 |
| Pneumonia, Pleuritis, Hydrothorax . . . | 74 | 42 | 2 | 2 | 2 | 15 | 4 | 3 | 4 |
| Hooping-cough | 42 | 36 | 1 | 0 | 0 | 0 | 2 | 2 | 1 |
| Phthisis | 224 | 65 | 9 | 15 | 15 | 4 | 75 | 23 | 17 |
| Influenza | 14 | 14 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Dysentery | 48 | 34 | 0 | 0 | 3 | 1 | 6 | 2 | 2 |
| Quinsy | 28 | 14 | 2 | 2 | 6 | 1 | 0 | 3 | 0 |
| Cutaneous diseases, Scirrhus, and Cancerous affections | 179 | 90 | 5 | 11 | 22 | 15 | 30 | 6 | 1 |
| Scrofulous affections | 107 | 36 | 5 | 8 | 12 | 15 | 19 | 8 | 4 |
| Syphilitic and Mercurial affections, &c. . . | 105 | 44 | 7 | 7 | 12 | 21 | 10 | 4 | 0 |
| Rheumatism and Bruise, &c. | 76 | 19 | 0 | 1 | 8 | 29 | 16 | 3 | 0 |
| Erysipelas, Small-pox, Scarlatina, &c. . . | 38 | 28 | 2 | 1 | 1 | 0 | 0 | 6 | 0 |
| Typhus Fever | 26 | 12 | 4 | 2 | 3 | 1 | 3 | 1 | 0 |
| Disease of the Kidney, &c. | 9 | 5 | 0 | 3 | 0 | 1 | 0 | 0 | 0 |
| Fistula in the Anus | 2 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 |
| Lead affection | 14 | 5 | 0 | 0 | 0 | 7 | 0 | 2 | 0 |
| | 2753 | 1180 | 94 | 178 | 291 | 458 | 354 | 145 | 3 |

REPORT OF CASES. No. II.

FROM 1ST MAY, 1844, TO 1ST MAY, 1845.

| Seat of Disease and Result of Treatment. | Total. | Cured. | Nearly Cured. | Much improved. | Improved. | No Change. | Beginning the Treatment. | Discontinued the Treatment. | Dead. |
|--|--------|--------|---------------|----------------|-----------|------------|--------------------------|-----------------------------|-------|
| Disease of the Organs of Respiration, Heart, and Blood-vessels . . . | 264 | 30 | 15 | 38 | 89 | 13 | 11 | 58 | 10 |
| „ of the Skin, Bones, Muscles, and Glands . . . | 171 | 20 | 6 | 44 | 64 | 10 | 7 | 19 | 1 |
| „ of the Uterus, Bladder, and Kidneys . . . | 141 | 24 | 11 | 26 | 53 | 7 | 4 | 16 | 0 |
| „ of the Brain, Nerves, and Senses . . . | 190 | 25 | 7 | 51 | 57 | 12 | 12 | 24 | 2 |
| „ of the Organs of Digestion | 265 | 45 | 9 | 56 | 113 | 15 | 8 | 17 | 2 |
| | 1031 | 144 | 48 | 215 | 376 | 57 | 42 | 134 | 15 |

| Period of Illness prior to the Patients coming to the Institution. | Prognosis |
|--|----------------------------|
| From 1 day to 1 year 270 | Favorable 238 |
| „ 1 year to 2 years 125 | Serious 474 |
| „ 2 years to 5 „ 220 | Very serious 251 |
| „ 5 „ 10 „ 162 | Incurable 35 |
| „ 10 „ 20 „ 141 | Doubtful 33 |
| „ 20 „ 30 „ 27 | |
| „ 30 „ 40 „ and upwards 23 | Total . . . 1031 |
| Unknown 63 | |
| Total . . . 1031 | |

| | |
|--|------|
| Discharged (Cured and Benefited) | 386 |
| Dead | 15 |
| Remaining under Treatment | 630 |
| Total | 1031 |

15 deaths in 1031 cases treated, give 1 death in $68\frac{1}{15}$ cases.

| Details and Classification of Acute and Chronic Cases. | Total. | Cured. | Nearly Cured. | Much improved. | Improved. | No Change. | Beginning the Treatment. | Discontinued the Treatment. | Dead. |
|--|--------|--------|---------------|----------------|-----------|------------|--------------------------|-----------------------------|-------|
| Cerebral affections, Apoplexy, Encephalitis .. | 52 | 4 | 3 | 15 | 17 | 4 | 3 | 6 | 0 |
| Epilepsy, Paralysis, Mental affections, &c. .. | 34 | 7 | 0 | 6 | 9 | 2 | 2 | 8 | 0 |
| Amaurosis, Deafness, Deaf and Dumb | 41 | 5 | 1 | 12 | 11 | 4 | 2 | 6 | 0 |
| Cataract, Fungus, and Fistula.. .. . | 11 | 0 | 0 | 2 | 6 | 0 | 0 | 2 | 1 |
| Ophthalmia, and Scrofulous Ophthalmia .. | 44 | 6 | 1 | 10 | 19 | 3 | 2 | 3 | 0 |
| Gastritis | 146 | 25 | 12 | 36 | 51 | 5 | 6 | 10 | 1 |
| Enteritis | 18 | 4 | 1 | 2 | 5 | 3 | 0 | 2 | 1 |
| Uterine, Ovarian affection | 51 | 6 | 2 | 8 | 25 | 1 | 2 | 7 | 0 |
| Gastro-enteritis | 73 | 5 | 0 | 17 | 39 | 5 | 0 | 6 | 1 |
| Gastro-entero-metritis | 91 | 15 | 7 | 19 | 35 | 2 | 0 | 13 | 0 |
| Gastro-entero-bronchitis | 54 | 9 | 2 | 5 | 21 | 3 | 3 | 11 | 0 |
| Pneumonia, Hydrothorax, Pleuritis, and Bronchitis | 81 | 15 | 7 | 18 | 23 | 3 | 3 | 10 | 2 |
| Whooping-cough | 8 | 4 | 1 | 0 | 1 | 1 | 0 | 1 | 0 |
| Phthisis.. .. . | 107 | 10 | 5 | 16 | 35 | 5 | 7 | 21 | 8 |
| Dysentery | 3 | 2 | 0 | 0 | 1 | 0 | 0 | 0 | 0 |
| Quinsy, &c.. .. . | 3 | 0 | 0 | 0 | 2 | 1 | 0 | 0 | 0 |
| Cutaneous, Scirrhus, and Cancerous affections | 67 | 7 | 3 | 20 | 22 | 7 | 1 | 7 | 0 |
| Rheumatism, &c. | 34 | 2 | 1 | 2 | 16 | 1 | 4 | 7 | 1 |
| Erysipelas, Small-pox, and Scarlatina | 6 | 2 | 0 | 2 | 1 | 1 | 0 | 0 | 0 |
| Typhus Fever | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Diseases of the Bladder, Kidneys, and Genital organs | 12 | 0 | 0 | 2 | 5 | 0 | 1 | 4 | 0 |
| Mechanical Injuries, Bruises, Sprains, and spinal affections | 19 | 6 | 0 | 4 | 6 | 1 | 1 | 1 | 0 |
| Heart affections.. .. . | 22 | 0 | 0 | 5 | 8 | 2 | 4 | 3 | 0 |
| Scrofulous affections | 29 | 3 | 1 | 7 | 14 | 1 | 0 | 3 | 0 |
| Syphilitic and Mercurial affections.. .. . | 24 | 6 | 1 | 7 | 4 | 2 | 1 | 3 | 0 |
| | 1031 | 144 | 48 | 215 | 376 | 57 | 42 | 134 | 15 |
| Number of Cases under treatment from October 1839, to the 1st May 1844 | | | | | | 2753 | | | |
| Number of Cases under treatment during the last 12 months, viz. from the 1st May 1844, to the 1st May 1845 | | | | | | 1031 | | | |
| Total | | | | | | 3784 | | | |

C.

THE THEORY OF RE-ACTION.

THE theory originally put forth to account for the action of Homœopathic remedies is contradictory, and based upon numerous assumptions. It may be shortly stated thus: "There is a vital power of re-action against morbid agents. Diseases caused by medicines are more powerful than natural diseases. Two diseases of a like nature cannot exist in the human system at the same time. If, therefore, to a person suffering from natural disease a medicine be administered having the property to excite an analogous disease, it will destroy the natural one, and then, the medicine being discontinued, the vital power of re-action will overcome the disease which has been artificially induced, and bring the patient to perfect health." In the first place, however, we have no sufficient proof of the greater strength of medicinal, as compared with natural, diseases; nor, secondly, that the human system cannot suffer from two like diseases at the same time. Moreover, if these points were established, it still remains to be shown why the vital power which is sufficient to throw off the severer medicinal disease, should not be sufficient to throw off the natural and milder form. It is also to be remarked, that if the cure wrought by the medicinal disease be owing to its destroying the natural one by its greater severity, and to the law that two like diseases cannot exist together, it would seem likely, that in proportion to the strength of the natural disease (to which the patient must have been predisposed), would be the resistance of the system to the action of the artificial one; but, instead of this, the susceptibility to the action of Homœopathic medicines is precisely in proportion to the activity of the original disorder.

The theory in the text was originally put forward by the Author in a weekly journal three or four years back. It has the advantage of being in harmony with the peculiar views indicated by Van Helmont, Wepfer, Stahl, and Hoffmann, and which have, more or less, commanded attention during a period of two hundred years.

D.

MINOR OBJECTIONS AGAINST HOMŒOPATHY.

THE majority of the statements brought forward as objections to Homœopathy are too frivolous and loose to be noticed in a serious treatise on the subject. They would form an amusing work on the "Curiosities of medical prejudice." One gentleman, a member of the College of Surgeons, actually took the trouble to endeavour by chemical tests to discover the medicine in globules professing to contain only the quadrillionth or decillionth part of a grain ; and because his tests failed (he gives us no scientific account of them), he denounced Homœopathy in a public lecture as an "abomination." It must either have been the intention of this gentleman to minister to public ignorance and prejudice, or he must himself have been ignorant not only of the meaning of the term Homœopathy (for Homœopathy is not a question of *doses*), but also of the limited powers of chemical tests. "Some scientific persons," says Sir Humphrey Davy, "have doubted the existence of any specific matter in the atmosphere producing intermittent fevers in marshy countries and hot climates ; but that a specific matter of contagion has not been detected by chemical means in the atmosphere of marshes, does not prove its non-existence." Again : the beautiful tests for arsenic are well known ; yet, regarding this agent which is detected comparatively with extreme readiness, Dr. Christison, more modest than the lecturer, writes thus : "It is generally believed that arsenic does enter the blood ; yet no one has hitherto been able to discover it satisfactorily there. The want of conclusive facts, however, to prove the presence of arsenic throughout the body *need not excite any surprise*, considering the minute quantity in

which poisons operate, and the difficulty of detecting such quantities in the blood." Well-informed chemists would never absolutely infer from the failure even of the most delicate and convenient tests, that the agent for which they are seeking is not present, but merely that it is not present in any *appreciable* quantity. That the quadrillionth part of a grain is not usually an appreciable quantity, so far as chemical science has yet proceeded, is known to most persons.

I have noticed the above objection because it was put forward with some parade of scientific knowledge, as a matter of "instruction" to pupils, who were probably credulous enough to believe that chemical tests had been brought to the perfection which the argument would indicate. The ignorance of the import of the term Homœopathy, also, manifested by this objector, is very common ; and sometimes it is accompanied by a total inability to discriminate between the expressions "like" and "identical." Whole pages are constantly wasted in solemn arguments to show the folly of believing it possible to cure a disease by a further administration of the *same* thing that caused it,—a folly which, as far as is known, has never yet had an existence.

E.

ENGLISH HOMŒOPATHIC ASSOCIATION.

ADDRESS.

FROM the time when Homœopathy was first promulgated, the struggle on its behalf has been carried on solely by the individual efforts of the few physicians who have had the candour and courage to investigate its principles, and to acknowledge its claims. But within the comparatively short space which has intervened since the period when it was recognised only by a single mind, it has been diffused by those efforts throughout almost every civilized country ; and the time is now come when its disciples are sufficiently numerous to take, by a judicious organization, a definite part in promoting its reception.

The English Homœopathic Association is therefore constituted with the view of uniting, as completely as possible, the friends of Homœopathy (professional and non-professional), throughout the country, and of enabling them to give effect, by active co-operation, to the interest they feel in its advancement. All who are acquainted with the system, or who desire to promote its fair investigation, are invited to join the ranks thus formed ; and, as the advantages to be derived not only from a well-planned organization, but from *numerous*, rather than from individually large, contributions, have been strikingly exemplified in connexion with many of the most important questions of the present day, it has been resolved that the funds of the Association shall be raised entirely by voluntary donations, coupled with the payment of half-a-crown from each of its Members as an annual fee for registration.

Among the chief objects of the Association are,—

- I. To bring together the most active friends of Homœopathy by means of Annual General Meetings, at which the progress and prospects of the science may be detailed.
- II. To publish treatises explanatory of the principles of the system, for distribution (gratuitously as far as practicable) amongst the Members and the public.
- III. To furnish the Members with statistical reports of Cases in the various Homœopathic Institutions, and with notices on all important points bearing on the progress of the cause.
- IV. To promote the publication of a correct translation of the works of Hahnemann and others.

That these measures effectually carried out would greatly accelerate the progress of the science, will at once be seen. The statements furnished at the Yearly Meetings would present to the public the *facts* of Homœopathy as the best antidote to the libels of angry and uninformed opponents; the general circulation of explanatory treatises would carry knowledge into quarters where the system may never have been heard of, except through misrepresentations; and the publication of cases, and also of the works of the founder of the system, would be calculated to stimulate members of the medical profession to abandon their present mode of opposition, and to resort to scientific experiments as the only test of the truth or falsehood of scientific statements.

And apart from these consequences of its active efforts, the mere existence of the Association will work much good. The majority of the world dread ridicule more than they love truth; and while individuals feel that in venturing to give even a trial to Homœopathy, they are exposing themselves singly to the jests of its opponents,—the prejudiced, and consequently uninquiring, multitude,—they will timidly draw back. If, however, they are fortified by being able to point to a body large in number, and

comprising many respected contributors to science, openly avowing their recognition of the doctrine as the result of personal trial and investigation, this difficulty will disappear. The advocate of the old school, while he denounces the system as unworthy of inquiry, and boasts of never having descended to its statistics, will no longer be regarded as an absolute authority, and his phrases of "impostor" and "dupe," levelled at the practitioners and the disciples of a science of which he is ignorant, will lose their force when he is reminded that terms of this sort can scarcely apply to a large and influential body, using their best efforts, by the diffusion of information, to enable him, if it be possible, to prove them in the wrong.

Persons desirous of joining the Association, are requested to communicate with the Honorary Secretary, Park Crescent, Stockwell, Surrey ; or with any of the under-mentioned gentlemen.

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